	Α	В	С	D	Ε	F	G	Н	I	J	K	L	М	N	0	Р	Q
1	271 Uns	solici	ted E	ligik	ility	Res	oons	e Con	panion File Alw	ays (Couple	With A TennC	are 834 Trans	action		Tenness	see Specific Values
2	Element ID	Elem Use			DataT ype		Seg Rep	Loop ID		Loop Rep	Comp Seq ID	DED Name	Industry Name or Alias	HIPAA Valid Values	HIPAA Notes	TN Valid Values	TN Notes
3	ISA01	R	2	2	ID	R	1		INTERCHANGE CONTROL HEADER			Authorization Information Qualifier		00, 03			Preferred value is 00
4	ISA02	R	10	10	AN	R	1		INTERCHANGE CONTROL HEADER			Authorization Information					
5	ISA03	R	2	2	ID	R	1		INTERCHANGE CONTROL HEADER			Security Information Qualifier		00, 01			Preferred value is 00
6	ISA04	R	10	10	AN	R	1		INTERCHANGE CONTROL HEADER			Security Information					
7	ISA05	R	2	2	ID	R	1		INTERCHANGE CONTROL HEADER			Interchange ID Qualifier		01, 14, 20, 27, 28, 29, 30, 33, ZZ			Preferred value is ZZ
8	ISA06	R	15	15	AN	R	1		INTERCHANGE CONTROL HEADER			Interchange Sender ID					TennCare's ID 626001445TC.
9	ISA07	R	2	2	ID	R	1		INTERCHANGE CONTROL HEADER			Interchange ID Qualifier		01, 14, 20, 27, 28, 29, 30, 33, 7Z			Preferred value is ZZ
10	ISA08	R	15	15	AN	R	1		INTERCHANGE CONTROL HEADER			Interchange Receiver ID					This value will be the Sender Trading Partner ID.
11	ISA09	R	6	6	DT	R	1		INTERCHANGE CONTROL HEADER			Interchange Date		Format: YYMMDD			This is the date when the file/batch is created by TCMIS.
12	ISA10	R	4	4	TM	R	1		INTERCHANGE CONTROL HEADER			Interchange Time		Format: HHMM			
13	ISA11	R	1	1	ID	R	1		INTERCHANGE CONTROL HEADER			Interchange Control Standards ID		U			
14	ISA12	R	5	5	ID	R	1		INTERCHANGE CONTROL HEADER			Interchange Control Version Number		00401			
15	ISA13	R	9	9	N0	R	1		INTERCHANGE CONTROL HEADER			Interchange Control Number					Same as IEA02
16	ISA14	R	1	1	ID	R	1		INTERCHANGE CONTROL HEADER			Acknowledgment Requested		0, 1			
17	ISA15	R	1	1	ID	R	1		INTERCHANGE CONTROL HEADER			Usage Indicator		P, T			
18	ISA16	R	1	1		R	1		INTERCHANGE CONTROL HEADER			Component Element Separator					
19	GS01 GS02	R R			ID AN	R R	1		FUNCTIONAL GROUP HEADER FUNCTIONAL			Functional Identifier Code Application Sender's		НВ			Same as ISA06
20 21	GS03	R	2	15	AN	R	1		GROUP HEADER FUNCTIONAL GROUP HEADER			Code Application Receiver's Code					Same as ISA08
22	GS04 GS05	R R	8	8	DT TM	R R	1		FUNCTIONAL GROUP HEADER FUNCTIONAL			Date Time		Format: CCYYMMDD			
23 24	GS06	R	1	9	N0	R	1		GROUP HEADER FUNCTIONAL GROUP HEADER			Group Control Number					
25	GS07 GS08	R R	1		ID AN	R R	1		FUNCTIONAL GROUP HEADER FUNCTIONAL			Responsible Agency Code Version/Release/		X 004010X092A1			
26 27	ST01	R	3		ID	R	1		GROUP HEADER TRANSACTION SET HEADER			Industry ID Code Transaction Set Identifier Code		271		271	Value being auto plugged by translation map

	Α	В	С	D	Ε	F	G	Н	I	J	K	L	М	N	0	Р	Q
1	271 Uns	olici	ted E	ligik	oility	Res	ons	e Con	panion File Alv	vays	Couple	With A TennC	are 834 Trans	action		Tennes	see Specific Values
2		Elem Use		Max Len	DataT ype	Seg Use		ID .			Comp Seq ID	DED Name	Industry Name or Alias	HIPAA Valid Values	HIPAA Notes	TN Valid Values	TN Notes
28	ST02	R	4	9	AN	R	1		TRANSACTION SET HEADER			Transaction Set Control Number			Must be identical to SE02 value		
29	BHT01	R	4	4	ID	R	1		BEGINNING OF HIERARCHICAL TRANSACTION			Hierarchical Structure Code		0022		0022	Value being auto plugged by translation map
	BHT02	R	2	2	ID	R	1		BEGINNING OF HIERARCHICAL			Transaction Set Purpose Code		11		11	Value being auto plugged by translation map
30	ВНТ03	S	1	30	AN	R	1		TRANSACTION BEGINNING OF HIERARCHICAL			Reference Identification	Submitter Transaction		Required to be used ONLY if transaction is processed in real time do not use for		
31									TRANSACTION				Identifier		batch transactions. Must be returned in a real-time 271 transaction if one is submitted in 270		
32	HL03	R	1	2	ID	R	1	2000A	INFORMATION SOURCE LEVEL	>1		Hierarchical Level Code		20	20 = Information Source	20	Value being auto plugged by translation map
33		R	1		ID	R	1		INFORMATION SOURCE LEVEL	>1		Hierarchical Child Code		0,1		1	Value being auto plugged by translation map
34	NM101	R	2	3	ID	R	1	2100A	INFORMATION SOURCE NAME	1		Entity Identifier Code		2B, 36, GP, P5, PR	2B=3rd party admin; 36=Employer; GP=Gateway provider; P5=Plan Sponsor; PR=Paver	P5	
35	NM102	R	1	1	ID	R	1	2100A	INFORMATION SOURCE NAME	1		Entity Type Qualifier		1, 2	1=person; 2=non-person entity	2	
36	NM103	S	1	35	AN	R	1	2100A	INFORMATION SOURCE NAME	1		Name Last or Organization Name	Information Source Last or Organization Name			TennCare	
37	NM108	R	1	2	ID	R	1	2100A	INFORMATION SOURCE NAME	1		Identification Code Qualifier		24, 46, FI, NI, PI, SV, XX		FI	
_	NM109	R	2	80	AN	R	1	2100A	INFORMATION SOURCE NAME	1		Identification Code	Information Source Primary Identifier	34, 77		62-6001445	TennCare's Tax ID
39	HL03	R	1	2	ID	S	1	2000B	INFORMATION RECEIVER LEVEL	>1		Hierarchical Level Code		21	21=Information Receiver.	21	Value being auto plugged by translation map
40		R	1	1	ID	S	1		INFORMATION RECEIVER LEVEL	>1		Hierarchical Child Code		0, 1	0=no subordinate levels; 1=subordinate levels exist.	1	Value being auto plugged by translation map
41	NM101	R	2	3	ID	R	1	2100B	INFORMATION RECEIVER NAME	1		Entity Identifier Code		1P, 2B, 36, 80, FA, GP, P5, PR		PR	
42	NM102	R	1	1	ID	R	1	2100B	INFORMATION RECEIVER NAME	1		Entity Type Qualifier		1, 2		2	
	NM103	S	1	35	AN	R	1	2100B	INFORMATION RECEIVER NAME	1		Name Last or Organization Name	Information Receiver Last or Organization Name				MCC Name
43	NM108	R	1	2	ID	R	1	2100B	INFORMATION	1		Identification Code	organization ramo	24, 34, FI, PI,		FI	
44	NM109	R	2	80	AN	R	1	2100B	RECEIVER NAME INFORMATION RECEIVER NAME	1		Qualifier Identification Code	Information Receiver	PP, SV, XV, XX	Qualified by NM108		MCC Tax ID
45													Identification Number				
46	-		2		ID	R	1		SUBSCRIBER NAME			Entity Type Qualifier		IL	IL=Insured or Subscriber	IL 1	Autoplugged
47		R S	1		ID AN	R R	1		SUBSCRIBER NAME SUBSCRIBER NAME			Entity Type Qualifier Name Last or	Subscriber Last		1=Person Required unless a rejection response is	'	Autoplugged
48							4					Organization Name	Name		generated and this element was not valued in the request. Required unless a rejection response is		
49		S			AN	R			SUBSCRIBER NAME			Name First	Subscriber First Name		generated and this element was not valued in the request.		
50	NM105	S	1	25	AN	R	1	2100C	SUBSCRIBER NAME	1		Name Middle	Subscriber Middle Name		Required if this is available from the Information Source's database unless a rejection response is generated and this element was not valued in the request.		
	NM107	S	1	10	AN	R	1	2100C	SUBSCRIBER NAME	1		Name Suffix	Subscriber Name Suffix		Use if available		

	Α	В		D	Е			Н		J	K	L	М	N	0	Р	Q
1	271 Uns	solici	ted E	iligik	ility	Res	oons	e Con	npanion File Alv	ways	Couple	With A TennC	are 834 Trans	action		Tenness	see Specific Values
_	Element ID		Min Len		DataT ype		Seg Rep	Loop ID	Loop Name	Loop Rep	Comp Seq ID	DED Name	Industry Name or Alias	HIPAA Valid Values	HIPAA Notes	TN Valid Values	TN Notes
	NM108	S	1	2	ID	R	1	2100C	SUBSCRIBER NAME			Identification Code Qualifier		М	MI = Member Identification Number. When the HIPAA Individual Identifier has been adopted, then the only valid value will be 'ZZ'. Required unless a rejection response is generated and this element was not valued is the required.	MI	Autoplugged
53	NM109	S	2	80	AN	R	1	2100C	SUBSCRIBER NAME	1		Identification Code	Subscriber Primary Identifier		Required unless a rejection response is generated and this element was not valued in the request.		Subscriber's SSN
54	2100C:																Loop 2110C: Rep 1 (Family Limit Current Year)
55	Rep 1 EB01	R	1	2	ID	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Eligibility or Benefit Information		1-8, A-C, CB, D- M, MC, N-Y		F	Value 'F' indicates 'limitations'.
56	EB02	S	3	3	ID	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT	>1						FAM	
57	EB03	S	1	2	ID	S	1	2110C	INFORMATION SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1						60	
58	EB04	S	1	3	ID	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Insurance Type Code		12-16, 41-43, 47, AP, C1, CO, CP, D, DB, EP, FF, GP, HM, HN, HS, IN, IP, LC, LD, LI, LT, MA- MC, MH, MI, MP OT, PE, PL, PP, PR, PS, GM, RP, SP, TF, WC, WU		ОТ	
59	EB05	S	1	50	AN	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Plan Coverage Description				FAMILY LIMIT CURRENT YEAR	Value being auto plugged by translation map.
60	EB06	S	1	2	ID	S	10	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Time Period Qualifier		6, 7, 13, 21 - 36		23	
61	EB09	S	2	2	ID	S	10	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Quantity Qualifier			Use to identify the type of units that are being conveyed in EB10.	99	
62	EB10	S	1	15	R	S	10	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Quantity	Benefit Quantity		Qualified by EB09		0.00 or greater
63	511 61	R	J					2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1			Date Time Qualifier	290, 292, 295, 304, 307, 318, 348, 349, 356, 357, 435, 472, 636	information contained in the corresponding EB loop. When using codes 307, 435, 472 at this level it is implied that these dates apply only to the EB loop that it is located in. If there is a need to supply a global date it must be provided within the DTP segment	193	This value is set only if currBeginDate > 0. Value '193' indicates Period Start Value being auto plugged by translation map.
64	DTP02	R	2	3	ID	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date Time Period Format Qualifier		D8, RD8	D8=CCYYMMDD RD8=range of dates in format CCYYMMDD-CCYYMMDD	D8	This value is set only if currBeginDate > 0. Value being auto plugged by translation map.

	Α	В	С	D	Е	F	G	Н	I	J	K	L	М	N	0	Р	Q
1	271 Un	solici	ited E	Eligit	oility	Res	pons	e Con	npanion File Al	ways	Couple	With A TennC	are 834 Trans	action		Tenness	see Specific Values
2	Element ID	Elem Use	Len	Len	DataT ype	Seg Use	Seg Rep	Loop ID	Loop Name		Comp Seq ID	DED Name	Alias	HIPAA Valid Values	HIPAA Notes	TN Valid Values	TN Notes
65	DTP03	R	1	35	AN	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date Time Period	Eligibility or Benefit Date Time Period				January 1 of current year based upon 834 File Effective Date
66	DTP01	R	3	3	ID	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date/Time Qualifier	Date Time Qualifier	193, 194, 198, 290, 292, 295, 304, 307, 318, 348, 349, 356, 357, 435, 472, 636	Used to convey dates associated with the information contained in the corresponding EB loop. When using codes 307, 435, 472 at this level it is implied that these dates apply only to the EB loop that it is located in. If there is a need to supply a global date it must be provided within the DTP segment	194	This value is set only if currEndDate > 0. Value '194' indicates Period End Value being auto plugged by translation map.
	DTP02	R	2	3	ID	S	20	2110C	SUBSCRIBER ELIGIBILITY OR	>1		Date Time Period Format Qualifier		D8, RD8	D8=CCYYMMDD RD8=range of dates in format CCYYMMDD-CCYYMMDD	D8	This value is set only if currEndDate > 0. Value being auto plugged by translation map.
67									BENEFIT INFORMATION								
68	DTP03	R	1	35	AN	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date Time Period	Eligibility or Benefit Date Time Period				834 File Effective Date
69	2100C:																Loop 2110C: Rep 2
	Rep 2 EB01	R	1	2	ID	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT	>1		Eligibility or Benefit Information		1-8, A-C, CB, D- M, MC, N-Y		F	(Family Limit Prior Year) Value 'F' indicates 'limitations'.
70	EB02	S	3	3	ID	S	1	21100	INFORMATION SUBSCRIBER	>1						FAM	
71	LBOZ			5			ľ	21100	ELIGIBILITY OR BENEFIT INFORMATION							T AW	
72	EB03	S	1	2	ID	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1						60	
73	EB04	S	1	3	ID	S	1		SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Insurance Type Code		12-16, 41-43, 47, AP, C1, CO, CP, D, DB, EP, FF, GP, HM, HN HS, IN, IP, LC, LD, LI, LT, MA- MC, MH, MI, MP OT, PE, PL, PP, PR, PS, GM, RP, SP, TF, WC, WU		от	
74	EB05	S	1	50	AN	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT	>1		Plan Coverage Description				FAMILY LIMIT PRIOR YEAR	
	EB06	S	1	2	ID	S	10	2110C	INFORMATION SUBSCRIBER ELIGIBILITY OR BENEFIT	>1		Time Period Qualifier		6, 7, 13, 21 - 36		23	
75 76	EB09	S	2	2	ID	S	10	2110C	INFORMATION SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Quantity Qualifier			Use to identify the type of units that are being conveyed in EB10.	99	
77	EB10	S	1	15	R	S	10	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Quantity	Benefit Quantity		Qualified by EB09		0.00 or greater

	Α	В	С	D	Е	F	G	Н	I	J	K	L	М	N	0	Р	Q
1	271 Uns								panion File Al	ways	Couple	With A TennC	are 834 Trans	action		Tenness	see Specific Values
		Elem			DataT				Loop Name		Comp	DED Name	Industry Name or		HIPAA Notes	TN Valid	TN Notes
2		Use	Len	Len	ype	Use	Rep	ID .	•	Rep	Seq ID		Alias	Values		Values	
78	DTP01	R	3	3	ID	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date/Time Qualifier	Date Time Qualifier	193, 194, 198, 290, 292, 295, 304, 307, 318, 348, 349, 356, 357, 435, 472, 636	Used to convey dates associated with the information contained in the corresponding EB loop. When using codes 307, 435, 472 at this level it is implied that these dates apply only to the EB loop that it is located in. If there is a need to supply a global date it must be provided within the DTP segment in long 4100C	193	This value is set only if prevBeginDate > 0. Value '193' indicates Period Begin Value being auto plugged by translation map.
	DTP02	R	2	3	ID	S	20		SUBSCRIBER ELIGIBILITY OR BENEFIT	>1		Date Time Period Format Qualifier		D8, RD8	D8=CCYYMMDD RD8=range of dates in format CCYYMMDD-CCYYMMDD	D8	This value is set only if prevBeginDate > 0. Value being auto plugged by translation map.
79									INFORMATION								
80	DTP03	R	1	35	AN	S	20		SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date Time Period	Eligibility or Benefit Date Time Period				January 1 of prior year based upon 834 File Effective Date
81	DTP01	R	3	3	ID	S	20		SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date/Time Qualifier	Date Time Qualifier	193, 194, 198, 290, 292, 295, 304, 307, 318, 348, 349, 356, 357, 435, 472, 636	Used to convey dates associated with the information contained in the corresponding EB loop. When using codes 307, 435, 472 at this level it is implied that these dates apply only to the EB loop that it is located in. If there is a need to supply a global date it must be provided within the DTP segment in least 4100.	194	This value is set only if prevEndDate > 0. Value '194' indicates Period End Value being auto plugged by translation map.
	DTP02	R	2	3	ID	S	20	2110C	SUBSCRIBER ELIGIBILITY OR	>1		Date Time Period Format Qualifier		D8, RD8	D8=CCYYMMDD RD8=range of dates in format CCYYMMDD-CCYYMMDD	D8	This value is set only if prevEndDate > 0. Value being auto plugged by translation map.
82									BENEFIT INFORMATION								
83	DTP03	R	1	35	AN	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date Time Period	Eligibility or Benefit Date Time Period				December 31 of prior year based upon 834 File Effective Date
84	2110C:								INFORMATION								Loop 2110C: Rep 3
85	Rep 3 EB01	R	1	2	ID	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT	>1		Eligibility or Benefit Information		1-8, A-C, CB, D- M, MC, N-Y		F	(Individual Limit Current Year) Value 'F' indicates 'limitations'. Value being auto plugged by translation map.
00	EB02	S	3	3	ID	S	1	2110C	INFORMATION SUBSCRIBER	>1						IND	
86									ELIGIBILITY OR BENEFIT INFORMATION								
87	EB03	S	1	2	ID	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1						60	
88		S	1	3	ID	S	1		SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Insurance Type Code		12-16, 41-43, 47, AP, C1, C0, CP, D, DB, EP, FF, GP, HM, HN HS, IN, IP, LC, LD, LI, LT, MA- MC, MH, MI, MP OT, PE, PL, PP, PR, PS, GM, RP, SP, TF, WC		ОТ	
89	EB05	S	1	50	AN	S	1		SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Plan Coverage Description				INDIVIDUAL LIMIT - CURRENT YEAR	Value being auto plugged by translation map.

	Α	В	С	D	E	ΙF	G	Н	ı	J	K	L	М	N	0	Р	Q
1									panion File Alv			With A TennC		action		Tenness	see Specific Values
-	Element	Elem	Min	Max	DataT	Seg	Seg	Loop	Loop Name	Loop	Comp	DED Name	Industry Name or	HIPAA Valid	HIPAA Notes	TN Valid	TN Notes
2	ID	Use	Len	Len	ype	Use	Rep	ID		_	Seq ID		Alias	Values		Values	
90	EB06	S	1	2	ID	S	10	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT	>1		Time Period Qualifier		6, 7, 13, 21 - 36		23	
91	EB09	S	2	2	ID	S	10	2110C	INFORMATION SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Quantity Qualifier			Use to identify the type of units that are being conveyed in EB10.	99	
92	EB10	S	1	15	R	S	10	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Quantity	Benefit Quantity		Qualified by EB09		0.00 or greater
93	DTP01	R	3	3	ID	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date/Time Qualifier	Date Time Qualifier	193, 194, 198, 290, 292, 295, 304, 307, 318, 348, 349, 356, 357, 435, 472, 636	Used to convey dates associated with the information contained in the corresponding EB loop. When using codes 307, 435, 472 at this level it is implied that these dates apply only to the EB loop that it is located in. If there is a need to supply a global date it must be provided within the DTP segment	193	This value is set only if currBeginDate > 0. Value '193' indicates Period Start Value being auto plugged by translation map.
94	DTP02	R	2	3	ID	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date Time Period Format Qualifier		D8, RD8	D8=CCYYMMDD RD8=range of dates in format CCYYMMDD-CCYYMMDD	D8	This value is set only if currBeginDate > 0. Value being auto plugged by translation map.
95	DTP03	R	1	35	AN	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date Time Period	Eligibility or Benefit Date Time Period				January 1 of current year based upon 834 File Effective Date
	DTP01	R	3	3	ID	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date/Time Qualifier	Date Time Qualifier	193, 194, 198, 290, 292, 295, 304, 307, 318, 348, 349, 356, 357, 435, 472, 636	Used to convey dates associated with the information contained in the corresponding EB loop. When using codes 307, 435, 472 at this level it is implied that these dates apply only to the EB loop that it is located in. If there is a need to supply a global date it	194	This value is set only if currEndDate > 0. Value '194' indicates Period End Value being auto plugged by translation map.
96															must be provided within the DTP segment		
97	DTP02	R	2	3	ID	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date Time Period Format Qualifier		D8, RD8	D8=CCYYMMDD RD8=range of dates in format CCYYMMDD-CCYYMMDD	D8	This value is set only if currEndDate > 0. Value being auto plugged by translation map.
98	DTP03	R	1	35	AN	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date Time Period	Eligibility or Benefit Date Time Period				834 File Effective Date
99	2110C:			1		t	1		INFURIVATION								Loop 2110C: Rep 4
99	Rep 4 EB01	R	1	2	ID	S	1	2110C	SUBSCRIBER ELIGIBILITY OR	>1		Eligibility or Benefit Information		1-8, A-C, CB, D- M, MC, N-Y		F	(Individual Limit Prior Year) Value 'F' indicates 'limitations'.
100									BENEFIT INFORMATION								
101	EB02	S	3	3	ID	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1						IND	
102	EB03	S	1	2	ID	S	1	2110C	INFORMATION SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1						60	

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	Α	В	С	D	Е	F	G	Н	I	J	K	L	М	N	0	Р	Q
1	271 Un	solici						e Con	panion File Al	ways	Couple	With A TennC	are 834 Trans	action		Tenness	see Specific Values
2	Element ID			Max Len	DataT ype	Seg Use	Seg Rep	Loop ID	Loop Name	Loop Rep	Comp Seq ID	DED Name	Industry Name or Alias	HIPAA Valid Values	HIPAA Notes	TN Valid Values	TN Notes
103	EB04	S		3	ID	S	1		SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Insurance Type Code		12-16, 41-43, 47, AP, C1, CO, CP, D, DB, EP, FF, GP, HM, HN, HS, IN, IP, LC, LD, LI, LT, MA- MC, MH, MI, MP OT, PE, PL, PP, PR, PS, QM, RP, SP, TF, WC, WU	This information qualifies type of policy within insurance program defined in EB03.	ОТ	
	EB05	S	1	50	AN	S	1	2110C	SUBSCRIBER	>1		Plan Coverage				INDIVIDUAL	
104									ELIGIBILITY OR BENEFIT INFORMATION			Description				LIMIT - PRIOR YEAR	
105	EB06	S	1	2	ID	S	10	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT	>1		Time Period Qualifier		6, 7, 13, 21 - 36		23	
106	EB09	S	2	2	ID	S	10	2110C	INFORMATION SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Quantity Qualifier		99, CA, CE, DB, DY, HS, LA, LE, MN, P6, QA, S7, S8, VS, YY.	Use to identify the type of units that are being conveyed in EB10.	99	
	EB10	S	1	15	R	S	10	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT	>1		Quantity	Benefit Quantity		Qualified by EB09		0.00 or greater
107	DTP01	R	3	3	ID	S	20	2110C	INFORMATION SUBSCRIBER	>1		Date/Time Qualifier	Date Time Qualifier	193, 194, 198,	Used to convey dates associated with the	193	This value is set only if prevBeginDate > 0.
	511 01		5	J			20	21100	ELIGIBILITY OR BENEFIT INFORMATION			Bate/Time Qualifier	Date Time Qualific	290, 292, 295, 304, 307, 318, 348, 349, 356, 357, 435, 472, 636	information contained in the corresponding EB loop. When using codes 307, 435, 472 at this level it is implied that these dates apply only to the EB loop that it is located in. If there is a need to supply a global date it must be provided within the DTP segment	133	Value '193' indicates Period Begin Value being auto plugged by translation map.
108	DTP02	R	2	3	ID	S	20	2110C	SUBSCRIBER	>1		Date Time Period		D8, RD8	in Loop 2100C D8=CCYYMMDD RD8=range of dates in	D8	This value is set only if prevBeginDate > 0.
109									ELIGIBILITY OR BENEFIT INFORMATION			Format Qualifier			format CCYYMMDD-CCYYMMDD		Value being auto plugged by translation map.
110	DTP03	R	1	35	AN	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date Time Period	Eligibility or Benefit Date Time Period				January 1 of prior year based upon 834 File Effective Date
	DTP01	R	3	3	ID	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date/Time Qualifier	Date Time Qualifier	193, 194, 198, 290, 292, 295, 304, 307, 318, 348, 349, 356, 357, 435, 472, 636	Used to convey dates associated with the information contained in the corresponding EB loop. When using codes 307, 435, 472 at this level it is implied that these dates apply only to the EB loop that it is located in. If there is a need to supply a global date it must be provided within the DTP segment	194	This value is set only if prevEndDate > 0. Value '194' indicates Period End Value being auto plugged by translation map.
	DTP02	R	2	3	ID	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT	>1		Date Time Period Format Qualifier		D8, RD8	D8=CCYYMMDD RD8=range of dates in format CCYYMMDD-CCYYMMDD	D8	This value is set only if prevEndDate > 0. Value being auto plugged by translation map.
112	DTP03	R	1	35	AN	S	20	2110C	INFORMATION SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date Time Period	Eligibility or Benefit Date Time Period				December 31 of prior year based upon 834 File Effective Date
114	2110C: Rep 5								XI XIII I I I XI X								Loop 2110C: Rep 5 (Substance Abuse 10 Day Limit Current Year)

	Α	В	С	D	Е	F	G	Н	I	J	K	L	М	N	0	Р	Q
1	271 Uns	solici	ted E	ligit	ility	Res	pons	e Con	panion File Al	ways	Couple	With A TennC	are 834 Trans	action		Tenness	see Specific Values
2	Element ID	Elem Use		Max Len	Data1 ype		Seg Rep	Loop ID	Loop Name	Loop Rep	Comp Seq ID	DED Name	Industry Name or Alias	HIPAA Valid Values	HIPAA Notes	TN Valid Values	TN Notes
115	EB01	R	1	2	ID	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT	>1		Eligibility or Benefit Information		1-8, A-C, CB, D- M, MC, N-Y		F	Value 'F' indicates 'limitations'.
116	EB02	S	3	3	ID	S	1	2110C	INFORMATION SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1						IND	
117	EB03	S	1	2	ID	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1						Al	
118	EB04	S	1	3	ID	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Insurance Type Code		12-16, 41-43, 47, AP, C1, CO, CP, D, DB, EP, FF, GP, HM, HN HS, IN, IP, LC, LD, LI, LT, MA- MC, MH, MI, MP OT, PE, PL, PP, PR, PS, QM, RP, SP, TF, WC, WU		ОТ	
119	EB05	S	1	50	AN	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Plan Coverage Description				SUBSTANCE ABUSE 10 DAY LIMIT - CURRENT YEAR	
120	EB06	S	1	2	ID	S	10	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Time Period Qualifier		6, 7, 13, 21 - 36		23	
121	EB09	S	2	2	ID	S	10	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Quantity Qualifier			Use to identify the type of units that are being conveyed in EB10.	DY	Value 'DY' indicates 'days'.
122	EB10	S	1	15	R	S	10	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Quantity	Benefit Quantity		Qualified by EB09		0 or greater
123	DTP01	R	3	3	ID	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date/Time Qualifier	Date Time Qualifier	193, 194, 198, 290, 292, 295, 304, 307, 318, 348, 349, 356, 357, 435, 472, 636	Used to convey dates associated with the information contained in the corresponding EB loop. When using codes 307, 435, 472 at this level it is implied that these dates apply only to the EB loop that it is located in. If there is a need to supply a global date it must be provided within the DTP segment	193	This value is set only if currBeginDate > 0. Value '193' indicates Period Start Value being auto plugged by translation map.
123	DTP02	R	2	3	ID	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date Time Period Format Qualifier		D8, RD8	D8=CCYYMMDD RD8=range of dates in format CCYYMMDD-CCYYMMDD	D8	This value is set only if currBeginDate > 0. Value being auto plugged by translation map.
125	DTP03	R	1	35	AN	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date Time Period	Eligibility or Benefit Date Time Period				January 1 of current year based upon 834 File Effective Date

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	Α	В	С	D	Е	F	G	Н		J	K	L	М	N	0	Р	Q
1									panion File Al	ways		With A TennC		action		Tenness	see Specific Values
-		Elem				Seg			Loop Name		Comp	DED Name	Industry Name or	HIPAA Valid	HIPAA Notes	TN Valid	TN Notes
2	ID	Use			ype	Use	Rep	ID .	·	Rep	Seq ID		Alias	Values		Values	
126	DTP01	R	3	3	ΙD	S	20		SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date/Time Qualifier	Date Time Qualifier	193, 194, 198, 290, 292, 295, 304, 307, 318, 348, 349, 356, 357, 435, 472, 636	Used to convey dates associated with the information contained in the corresponding EB loop. When using codes 307, 435, 472 at this level it is implied that these dates apply only to the EB loop that it is located in. If there is a need to supply a global date it must be provided within the DTP segment in Loop 3400C.	194	This value is set only if currEndDate > 0. Value '194' indicates Period End Value being auto plugged by translation map.
	DTP02	R	2	3	ID	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT	>1		Date Time Period Format Qualifier		D8, RD8	D8=CCYYMMDD RD8=range of dates in format CCYYMMDD-CCYYMMDD	D8	This value is set only if currEndDate > 0. Value being auto plugged by translation map.
127									INFORMATION								
128	DTP03	R	1	35	AN	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date Time Period	Eligibility or Benefit Date Time Period				834 File Effective Date
129	2110C: Rep 6								IN CINICALION								Loop 2110C: Rep 6 (Substance Abuse 10 Day Limit Prior Year)
130	EB01	R	1	2	ID	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT	>1		Eligibility or Benefit Information		1-8, A-C, CB, D- M, MC, N-Y		F	Value 'F' indicates 'limitations'. Value being auto plugged by translation map.
130	EB02	S	3	3	ID	S	1	2110C	INFORMATION SUBSCRIBER	>1						IND	
131									ELIGIBILITY OR BENEFIT INFORMATION								
132	EB03	S	1	2	ID	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1						Al	
133	EB04	S	1	3	ID	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Insurance Type Code		12-16, 41-43, 47, AP, C1, CO, CP, D, DB, EP, FF, GP, HM, HM, HS, IN, IP, LC, LD, LI, LT, MA- MC, MH, MI, MP OT, PE, PL, PP, PR, PS, QM, RP, SP, TF, WC,	This information qualifies type of policy within insurance program defined in EB03.	ОТ	
133	EB05	S	1	50	AN	S	1	2110C	SUBSCRIBER	>1		Plan Coverage				SUBSTANCE	
134									ELIGIBILITY OR BENEFIT INFORMATION			Description				ABUSE 10 DAY LIMIT - PRIOR YEAR	
135	EB06	S	1	2	ID	S	10	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Time Period Qualifier		6, 7, 13, 21 - 36		23	
136	EB09	S	2	2	ID	S	10	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Quantity Qualifier			Use to identify the type of units that are being conveyed in EB10.	DY	Value 'DY' indicates 'days'.
137	EB10	S	1	15	R	S	10	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Quantity	Benefit Quantity		Qualified by EB09		0 or greater

	Α	В	С	D	Е	F	G	Н	I	J	K	L	М	N	0	Р	Q
1	271 Un	solici	ted E	Eligit	oility	Res	pons	e Con	npanion File Al	ways	Couple	With A TennC	are 834 Trans	action		Tenness	see Specific Values
2	ID	Elem Use	Min Len	Max Len	ype	Seg Use	Seg Rep	ID	Loop Name	Loop Rep	Comp Seq ID	DED Name	Industry Name or Alias	HIPAA Valid Values	HIPAA Notes	TN Valid Values	TN Notes
138	DTP01	R	3	3	ID	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date/Time Qualifier	Date Time Qualifier	193, 194, 198, 290, 292, 295, 304, 307, 318, 348, 349, 356, 357, 435, 472, 636	Used to convey dates associated with the information contained in the corresponding EB loop. When using codes 307, 435, 472 at this level it is implied that these dates apply only to the EB loop that it is located in. If there is a need to supply a global date it must be provided within the DTP segment in local 4300.	193	This value is set only if currBeginDate > 0. Value '193' indicates Period Start Value being auto plugged by translation map.
	DTP02	R	2	3	ID	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT	>1		Date Time Period Format Qualifier		D8, RD8	D8=CCYYMMDD RD8=range of dates in format CCYYMMDD-CCYYMMDD	D8	This value is set only if currBeginDate > 0. Value being auto plugged by translation map.
139									INFORMATION								
140	DTP03	R	1	35	AN	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date Time Period	Eligibility or Benefit Date Time Period				January 1 of prior year based upon 834 File Effective Date
141	DTP01	R	3	3	ID	S	20		SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date/Time Qualifier	Date Time Qualifier	193, 194, 198, 290, 292, 295, 304, 307, 318, 348, 349, 356, 357, 435, 472, 636	Used to convey dates associated with the information contained in the corresponding EB loop. When using codes 307, 435, 472 at this level it is implied that these dates apply only to the EB loop that it is located in. If there is a need to supply a global date it must be provided within the DTP segment	194	This value is set only if currEndDate > 0. Value '194' indicates Period End Value being auto plugged by translation map.
	DTP02	R	2	3	ID	S	20	2110C	SUBSCRIBER	>1		Date Time Period		D8, RD8	D8=CCYYMMDD RD8=range of dates in	D8	This value is set only if currEndDate > 0.
142									ELIGIBILITY OR BENEFIT INFORMATION			Format Qualifier			format CCYYMMDD-CCYYMMDD		Value being auto plugged by translation map.
143	DTP03	R	1	35	AN	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date Time Period	Eligibility or Benefit Date Time Period				December 31 of prior year based upon 834 File Effective Date
144	2110C:								INICINIATION								Loop 2110C: Rep 7
144	Rep 7 EB01	R	1	2	ID	S	1	2110C	SUBSCRIBER ELIGIBILITY OR	>1		Eligibility or Benefit Information		1-8, A-C, CB, D- M, MC, N-Y	-	F	(Substance Abuse Lifetime Limit) Value 'F' indicates 'limitations'.
145	EB02	S	3	3	ID	S	1	2110C	BENEFIT INFORMATION SUBSCRIBER	>1				, -,		IND	
146		3	3	3		3		21100	ELIGIBILITY OR BENEFIT INFORMATION	~1						IND	
147	EB03	S	1	2	ID	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1						Al	
148	EB04	S			ID	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Insurance Type Code		12-16, 41-43, 47, AP, C1, CO, CP, D, DB, EP, FF, GP, HM, HN HS, IN, IP, LC, LD, LI, LT, MA- MC, MH, MI, MP OT, PE, PL, PP, PR, PS, GM, RP, SP, TF, WC		ОТ	
149		S	1	50	AN	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Plan Coverage Description				SUBSTANCE ABUSE LIFETIME LIMIT	

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	Α	В	С	D	E	ΙF	G	Н	ı	J	K	L	М	N	0	Р	Q
1									panion File Al			With A TennC			, ,	Tenness	see Specific Values
-	Element				DataT	Seg			-	Loop	Comp	DED Name	Industry Name or		HIPAA Notes		TN Notes
2	ID	Use	Len	Len	уре	Use	Rep	ID			Seq ID		Alias	Values		Values	
	EB06	S	1	2	ID	S	10	2110C	SUBSCRIBER ELIGIBILITY OR	>1		Time Period Qualifier		6, 7, 13, 21 - 36		32	
150									BENEFIT								
150		S	2	2	ID	S	10	2110C	INFORMATION SUBSCRIBER	>1		Quantity Qualifier		99. CA. CE. DB.	Use to identify the type of units that are	LA	Value 'LA' indicates 'lifetime'.
					_				ELIGIBILITY OR					DY, HS, LA, LE,	being conveyed in EB10.		
									BENEFIT INFORMATION					MN, P6, QA, S7, S8, VS, YY.			
151	ED 10		_				10	24420				0 "	5 5 6 13	00, 70, 11.	0 "5 11 5000		
	EB10	S	1	15	R	S	10	2110C	SUBSCRIBER ELIGIBILITY OR	>1		Quantity	Benefit Quantity		Qualified by EB09		0 or greater
152									BENEFIT								
	2110C:								INFORMATION								Loop 2110C: Rep 8
153	Rep 8	R	1	2	ID	S	1	21100	SUBSCRIBER	>1		Eligibility or Benefit		1-8, A-C, CB, D-		_	(Pharmacy Payout Current Month) Value 'F' indicates 'limitations'.
	LDUI	iX	l'	_	יוט	٥	l'	21100	ELIGIBILITY OR			Information		1-8, A-C, CB, D- M, MC, N-Y			value r inuicates illilitätions.
154									BENEFIT INFORMATION								
	EB02	S	3	3	ID	S	1	2110C	SUBSCRIBER	>1						IND	
									ELIGIBILITY OR BENEFIT								
155									INFORMATION								
	EB03	S	1	2	ID	S	1	2110C	SUBSCRIBER ELIGIBILITY OR	>1						88	
156									BENEFIT								
130	EB04	S	1	3	ID	S	1	2110C	INFORMATION SUBSCRIBER	>1		Insurance Type		12-16, 41-43,	This information qualifies type of policy	OT	
									ELIGIBILITY OR			Code		47, AP, C1, CO,	within insurance program defined in EB03.		
									BENEFIT INFORMATION					CP, D, DB, EP, FF, GP, HM, HN,			
														HS, IN, IP, LC,			
														LD, LI, LT, MA- MC, MH, MI, MP,			
														OT, PE, PL, PP,]		
														PR, PS, QM, RP, SP, TF, WC,			
157														WU	1		
	EB05	S	1	50	AN	S	1	2110C	SUBSCRIBER	>1		Plan Coverage				PHARMACY	
									ELIGIBILITY OR BENEFIT			Description				PAYOUT LIMIT	
158			_				10	24420	INFORMATION			T: D : 10 !!f		0.7.40.04.00			
	EB06	S	1	2	ID	S	10	2110C	SUBSCRIBER ELIGIBILITY OR	>1		Time Period Qualifier		6, 7, 13, 21 - 36		34	
159									BENEFIT								
.55		S	2	2	ID	S	10	2110C	INFORMATION SUBSCRIBER	>1		Quantity Qualifier		99, CA, CE, DB,	Use to identify the type of units that are	99	
									ELIGIBILITY OR						being conveyed in EB10.		
400									BENEFIT INFORMATION					MN, P6, QA, S7, S8, VS, YY.			
160	EB10	S	1	15	R	S	10	21100	SUBSCRIBER	>1		Quantity	Benefit Quantity		Qualified by EB09		0.00 or greater
	2510	Ĭ	ľ	.5	· `	Ĭ	10		ELIGIBILITY OR	[Quality	Dononi Quantity		Qualified by ED00		o.so of greater
161									BENEFIT INFORMATION								
	DTP01	R	3	3	ID	S	20		SUBSCRIBER	>1		Date/Time Qualifier	Date Time Qualifier	193, 194, 198,	Used to convey dates associated with the	193	This value is set only if currBeginDate > 0.
									ELIGIBILITY OR BENEFIT					290, 292, 295, 304, 307, 318,	information contained in the corresponding EB loop.		Value '193' indicates Period Start Value being auto plugged by translation map.
									INFORMATION					348, 349, 356,	When using codes 307, 435, 472 at this		and the program of th
														357, 435, 472, 636	level it is implied that these dates apply only to the EB loop that it is located in. If		
															there is a need to supply a global date it		
162															must be provided within the DTP segment		

	Α	В	С	D	Е	F	G	Н	1 1	J	K	1 1	М	N	0	Р	Q
1									npanion File Al	ways		With A TennO			<u> </u>	<u> </u>	see Specific Values
	Element	Elem			DataT				Loop Name		Comp	DED Name	Industry Name or		HIPAA Notes	TN Valid	TN Notes
163	DTP02	R R	Len 2	Len 3	ype ID	S	Rep 20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT	Rep >1	Seq ID	Date Time Period Format Qualifier	Alias	D8, RD8	D8=CCYYMMDD RD8=range of dates in format CCYYMMDD-CCYYMMDD	D8	This value is set only if currBeginDate > 0. Value being auto plugged by translation map.
164	DTP03	R	1	35	AN	S	20	2110C	INFORMATION SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date Time Period	Eligibility or Benefit Date Time Period				First day of current month based upon 834 File Effective Date
165	DTP01	R	3	3	ID	S	20	2110C	SUBSCRIBER SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date/Time Qualifier	Date Time Qualifier		Used to convey dates associated with the information contained in the corresponding EB loop. When using codes 307, 435, 472 at this level it is implied that these dates apply only to the EB loop that it is located in. If there is a need to supply a global date it must be provided within the DTP segment	194	This value is set only if currEndDate > 0. Value '194' indicates Period End Value being auto plugged by translation map.
166	DTP02	R	2	3	ID	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date Time Period Format Qualifier		D8, RD8	D8=CCYYMMDD RD8=range of dates in format CCYYMMDD-CCYYMMDD	D8	This value is set only if currEndDate > 0. Value being auto plugged by translation map.
167	DTP03	R	1	35	AN	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date Time Period	Eligibility or Benefit Date Time Period				834 File Effective Date
	2110C+								INFORMATION								Loop 2110C: Rep 9
100	Rep 9 EB01	R	1	2	ID	S	1	2110C	SUBSCRIBER ELIGIBILITY OR	>1		Eligibility or Benefit Information		1-8, A-C, CB, D- M, MC, N-Y		F	(Home Health Limit Current Year) Value 'F' indicates 'limitations'.
169									BENEFIT INFORMATION	ļ.,							
170	EB02	S	3	3	ID	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1						IND	
171	EB03	S	1	2	ID	S	1		SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1						44	
172	EB04	S	1	3	ID	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Insurance Type Code		12-16, 41-43, 47, AP, C1, CO, CP, D, DB, EP, FF, GP, HM, HN, HS, IN, IP, LC, LD, LI, LT, MA- MC, MH, MI, MP OT, PE, PL, PP, PR, PS, QM, RP, SP, TF, WC, WU	This information qualifies type of policy within insurance program defined in EB03.	ОТ	
173	EB05	S	1	50	AN	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Plan Coverage Description				HOME HEALTH LIMIT - CURRENT YEAR	
173	EB06	S	1	2	ID	S	10	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Time Period Qualifier		6, 7, 13, 21 - 36		23	
175	EB09	S	2	2	ID	S	10	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Quantity Qualifier			Use to identify the type of units that are being conveyed in EB10.	VS	VS' indicates 'visits'.

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	Α	В	С	D	F	F	G	Н	I I	J	K	1 1	М	l N	0	Р	Q
1									panion File Al			With A Tenno				Tenness	see Specific Values
-					DataT						Comp	DED Name	Industry Name or		HIPAA Notes	TN Valid	TN Notes
2	ID	Use	Len	Len	ype		Rep	ID .	·	Rep	Seq ID		Alias	Values		Values	
176	EB10	S	1	15	R	S	10		SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Quantity	Benefit Quantity		Qualified by EB09		0 or greater
177	DTP01	R	3	3	ID	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date/Time Qualifier	Date Time Qualifier	193, 194, 198, 290, 292, 295, 304, 307, 318, 348, 349, 356, 357, 435, 472, 636	Used to convey dates associated with the information contained in the corresponding EB loop. When using codes 307, 435, 472 at this level it is implied that these dates apply only to the EB loop that it is located in. If there is a need to supply a global date it must be provided within the DTP segment	193	This value is set only if currBeginDate > 0. Value '193' indicates Period Start Value being auto plugged by translation map.
	DTP02	R	2	3	ID	S	20	2110C	SUBSCRIBER ELIGIBILITY OR	>1		Date Time Period Format Qualifier		D8, RD8	D8=CCYYMMDD RD8=range of dates in format CCYYMMDD-CCYYMMDD	D8	This value is set only if currBeginDate > 0. Value being auto plugged by translation map.
178									BENEFIT INFORMATION								
179	DTP03	R	1	35	AN	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date Time Period	Eligibility or Benefit Date Time Period				January 1 of current year based upon 834 File Effective Date
180	DTP01	R	3	3	ID	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date/Time Qualifier	Date Time Qualifier	193, 194, 198, 290, 292, 295, 304, 307, 318, 348, 349, 356, 357, 435, 472, 636	Used to convey dates associated with the information contained in the corresponding EB loop. When using codes 307, 435, 472 at this level it is implied that these dates apply only to the EB loop that it is located in. If there is a need to supply a global date it must be provided within the DTP segment	194	This value is set only if currEndDate > 0. Value '194' indicates Period End Value being auto plugged by translation map.
181	DTP02	R	2	3	ID	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT	>1		Date Time Period Format Qualifier		D8, RD8	D8=CCYYMMDD RD8=range of dates in format CCYYMMDD-CCYYMMDD	D8	This value is set only if currEndDate > 0. Value being auto plugged by translation map.
182	DTP03	R	1	35	AN	S	20	2110C	INFORMATION SUBSCRIBER ELIGIBILITY OR BENEFIT	>1		Date Time Period	Eligibility or Benefit Date Time Period				834 File Effective Date
	2110C:					1			INFORMATION								Loop 2110C: Rep 10
183	Rep 10 EB01	R	1	2	ID	S	1	2110C	SUBSCRIBER ELIGIBILITY OR	>1		Eligibility or Benefit Information		1-8, A-C, CB, D- M, MC, N-Y		F	(Home Health Limit Prior Year) Value 'F' indicates 'limitations'.
184									BENEFIT INFORMATION								
185	EB02	S	3	3	ID	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT	>1						IND	
103	EB03	S	1	2	ID	S	1	2110C	INFORMATION SUBSCRIBER	>1				 		44	
186									ELIGIBILITY OR BENEFIT INFORMATION								
187	EB04	S	1	3	ID	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Insurance Type Code		12-16, 41-43, 47, AP, C1, CO, CP, D, DB, EP, FF, GP, HM, HN HS, IN, IP, LC, LD, LI, LT, MA- MC, MH, MI, MP, OT, PE, PL, PP, PR, PS, GM, RP, SP, TF, WC, WU		ОТ	

	Α	В	С	D	Е	F	G	Н	I	J	K	L	М	N	0	Р	Q
1	271 Uns								panion File Al	ways	Couple	With A TennC	are 834 Trans	action		Tenness	see Specific Values
'	Element	Elem	Min	Max	DataT	Seg	Seg	Loop	Loop Name	Loop	Comp	DED Name	Industry Name or	HIPAA Valid	HIPAA Notes	TN Valid	TN Notes
2		Use	Len	Len	ype	_	Rep	ID		Rep	Seq ID		Alias	Values		Values	
		S	1	50	AN	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Plan Coverage Description				HOME HEALTH LIMIT - PRIOR YEAR	Value being auto plugged by translation map.
188		S	1	2	ID	S	10	21100	SUBSCRIBER	>1		Time Period Qualifier		6, 7, 13, 21 - 36		00	
189		5	1	2	טו	5	10		ELIGIBILITY OR BENEFIT INFORMATION	>1		Time Period Qualifier		6, 7, 13, 21 - 36		23	
190	EB09	S	2	2	ID	S	10	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Quantity Qualifier			Use to identify the type of units that are being conveyed in EB10.	VS	VS' indicates 'visits'.
130	EB10	S	1	15	R	S	10	2110C	SUBSCRIBER	>1		Quantity	Benefit Quantity		Qualified by EB09		0 or greater
191									ELIGIBILITY OR BENEFIT								
192	DTP01	R	3	3	ID	S	20	2110C	INFORMATION SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date/Time Qualifier	Date Time Qualifier	193, 194, 198, 290, 292, 295, 304, 307, 318, 348, 349, 356, 357, 435, 472, 636	Used to convey dates associated with the information contained in the corresponding EB loop. When using codes 307, 435, 472 at this level it is implied that these dates apply only to the EB loop that it is located in. If there is a need to supply a global date it must be provided within the DTP segment	193	This value is set only if prevBeginDate > 0. Value '193' indicates Period Begin Value being auto plugged by translation map.
102	DTP02	R	2	3	ID	S	20	2110C	SUBSCRIBER	>1		Date Time Period		D8, RD8	D8=CCYYMMDD RD8=range of dates in	D8	This value is set only if prevBeginDate > 0.
193									ELIGIBILITY OR BENEFIT INFORMATION			Format Qualifier			format CCYYMMDD-CCYYMMDD		Value being auto plugged by translation map.
194	DTP03	R	1	35	AN	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date Time Period	Eligibility or Benefit Date Time Period				January 1 of prior year based upon 834 File Effective Date
195		R	3	3	ID	S	20		SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date/Time Qualifier	Date Time Qualifier	193, 194, 198, 290, 292, 295, 304, 307, 318, 348, 349, 356, 357, 435, 472, 636	Used to convey dates associated with the information contained in the corresponding EB loop. When using codes 307, 435, 472 at this level it is implied that these dates apply only to the EB loop that it is located in. If there is a need to supply a global date it must be provided within the DTP segment	194	This value is set only if prevEndDate > 0. Value '194' indicates Period End Value being auto plugged by translation map.
		R	2	3	ID	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT	>1		Date Time Period Format Qualifier		D8, RD8	D8=CCYYMMDD RD8=range of dates in format CCYYMMDD-CCYYMMDD	D8	This value is set only if prevEndDate > 0. Value being auto plugged by translation map.
196			4	0.5			00	04400	INFORMATION	. 4		Data Time Data	Councille Co.			ļ	December 04 of reference to the COLUMN
197	DTP03	R	1	35	AN	S	20		SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date Time Period	Eligibility or Benefit Date Time Period				December 31 of prior year based upon 834 File Effective Date
	2110C: Rep 11								INCURIVIATION								Loop 2110C: Rep 11 (Speech Therapy Limit Current Year)
199	EB01	R	1	2	ID	S	1		SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Eligibility or Benefit Information		1-8, A-C, CB, D- M, MC, N-Y		F	Value 'F' indicates 'limitations'.
200	EB02	S	3	3	ID	S	1		SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1						IND	

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1									npanion File Al			With A TennC			<u> </u>		see Specific Values
H					DataT				Loop Name	Loop	Comp	DED Name	Industry Name or		HIPAA Notes	TN Valid	TN Notes
2		Use	Len	Len	ype	_	Rep	ID		Rep	Seq ID		Alias	Values		Values	
	EB03	S	1	2	ID	S	1	2110C	SUBSCRIBER ELIGIBILITY OR	>1						AF	
201									BENEFIT								
201	EB04	S	1	3	ID	S	1	2110C	INFORMATION SUBSCRIBER	>1		Insurance Type		12-16, 41-43,	This information qualifies type of policy	OT	
									ELIGIBILITY OR BENEFIT			Code		47, AP, C1, CO, CP, D, DB, EP,	within insurance program defined in EB03.		
									INFORMATION					FF, GP, HM, HN	,		
														HS, IN, IP, LC, LD, LI, LT, MA-			
														MC, MH, MI, MP	,		
														OT, PE, PL, PP, PR, PS, QM,			
														RP, SP, TF, WC	,		
202														WU			
	EB05	S	1	50	AN	S	1	2110C	SUBSCRIBER ELIGIBILITY OR	>1		Plan Coverage Description				SPEECH THERAPY	
									BENEFIT							LIMIT -	
203	3								INFORMATION							CURRENT YEAR	
	EB06	S	1	2	ID	S	10	2110C	SUBSCRIBER ELIGIBILITY OR	>1		Time Period Qualifier		6, 7, 13, 21 - 36		23	
204									BENEFIT								
204		S	2	2	ID	S	10	2110C	INFORMATION SUBSCRIBER	>1		Quantity Qualifier		99, CA, CE, DB,	Use to identify the type of units that are	DY	
									ELIGIBILITY OR					DY, HS, LA, LE,	being conveyed in EB10.		
205									BENEFIT INFORMATION					MN, P6, QA, S7, S8, VS, YY.			
205		S	1	15	R	S	10	2110C	SUBSCRIBER	>1	1	Quantity	Benefit Quantity		Qualified by EB09		0 or greater
									ELIGIBILITY OR				,		,		, and the second
206	6								BENEFIT INFORMATION								
	DTP01	R	3	3	ID	S	20	2110C	SUBSCRIBER ELIGIBILITY OR	>1		Date/Time Qualifier	Date Time Qualifier	193, 194, 198, 290, 292, 295,	Used to convey dates associated with the information contained in the corresponding	193	This value is set only if currBeginDate > 0. Value '193' indicates Period Start
									BENEFIT					304, 307, 318,	EB loop.		Value being auto plugged by translation map.
									INFORMATION					348, 349, 356, 357, 435, 472,	When using codes 307, 435, 472 at this level it is implied that these dates apply		
														636	only to the EB loop that it is located in. If		
20-	,														there is a need to supply a global date it must be provided within the DTP segment		
207		R	2	3	ID	S	20	2110C	SUBSCRIBER	>1		Date Time Period	 	D8, RD8	D8=CCYYMMDD RD8=range of dates in	D8	This value is set only if currBeginDate > 0.
									ELIGIBILITY OR			Format Qualifier			format CCYYMMDD-CCYYMMDD		Value being auto plugged by translation map.
208									BENEFIT INFORMATION								
	DTP03	R	1	35	AN	S	20	2110C	SUBSCRIBER ELIGIBILITY OR	>1		Date Time Period	Eligibility or Benefit Date Time Period				January 1 of current year based upon 834 File Effective Date
209									BENEFIT				Sate Time Fellou				Ensure Bate
208		R	3	3	ID	S	20	2110C	INFORMATION SUBSCRIBER	>1		Date/Time Qualifier	Date Time Qualifier	193, 194, 198,	Used to convey dates associated with the	194	This value is set only if currEndDate > 0.
									ELIGIBILITY OR					290, 292, 295,	information contained in the corresponding		Value '194' indicates Period End
									BENEFIT INFORMATION					304, 307, 318, 348, 349, 356,	EB loop. When using codes 307, 435, 472 at this		Value being auto plugged by translation map.
														357, 435, 472, 636	level it is implied that these dates apply only to the EB loop that it is located in. If		
														030	there is a need to supply a global date it		
210)														must be provided within the DTP segment		
	DTP02	R	2	3	ID	S	20	2110C	SUBSCRIBER ELIGIBILITY OR	>1		Date Time Period Format Qualifier		D8, RD8	D8=CCYYMMDD RD8=range of dates in format CCYYMMDD-CCYYMMDD	D8	This value is set only if currEndDate > 0.
244									BENEFIT			Format Qualifier					Value being auto plugged by translation map.
211			1	1	1	1	1		INFORMATION	1	1	I		Ī	1		

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	Α	В	С	D	Е	F	G	Н	I	J	K	L	М	N	0	Р	Q
1	271 Un:	solici	ted E	Eligik	oility	Res	pons	e Con	npanion File Al	ways	Couple	With A TennO	are 834 Trans	action		Tenness	see Specific Values
2	ID	Elem Use	Len	Len	ype		Seg Rep	ID .		Loop Rep	Comp Seq ID	DED Name	Industry Name or Alias	HIPAA Valid Values	HIPAA Notes	TN Valid Values	TN Notes
212	DTP03	R	1	35	AN	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date Time Period	Eligibility or Benefit Date Time Period				834 File Effective Date
213	2110C:								IN OKWATION								Loop 2110C: Rep 12 (Speech Therapy Limit Prior Year)
214	EB01	R	1	2	ID	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Eligibility or Benefit Information		1-8, A-C, CB, D- M, MC, N-Y		F	Value 'F' indicates 'limitations'.
215	EB02	S	3	3	ID	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT	>1						IND	
216	EB03	S	1	2	ID	S	1	2110C	INFORMATION SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1						AF	
217	EB04	S	1	3	ID	S	1	2110C	INFORMATION SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Insurance Type Code		12-16, 41-43, 47, AP, C1, CO, CP, D, DB, EP, FF, GP, HM, HN, HS, IN, IP, LC, LD, LI, LT, MA- MC, MH, MI, MP, OT, PE, PL, PP, PR, PS, QM, RP, SP, TF, WC,		от	
218	EB05	S	1	50	AN	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Plan Coverage Description				SPEECH THERAPY LIMIT - PRIOR YEAR	Value being auto plugged by translation map.
219	EB06	S	1	2	ID	S	10	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Time Period Qualifier		6, 7, 13, 21 - 36		23	
220	EB09	S	2	2	ID	S	10	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Quantity Qualifier			Use to identify the type of units that are being conveyed in EB10.	DY	
221	EB10	S	1	15	R	S	10	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Quantity	Benefit Quantity		Qualified by EB09		0 or greater
		R	3	3	ID	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date/Time Qualifier	Date Time Qualifier	357, 435, 472, 636	Used to convey dates associated with the information contained in the corresponding EB loop. When using codes 307, 435, 472 at this level it is implied that these dates apply only to the EB loop that it is located in. If there is a need to supply a global date it must be provided within the DTP segment	193	This value is set only if prevBeginDate > 0. Value '193' indicates Period Begin Value being auto plugged by translation map.
222	DTP02	R	2	3	ID	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date Time Period Format Qualifier			D8=CCYYMMDD RD8=range of dates in format CCYYMMDD-CCYYMMDD	D8	This value is set only if prevBeginDate > 0. Value being auto plugged by translation map.
224	DTP03	R	1	35	AN	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date Time Period	Eligibility or Benefit Date Time Period				January 1 of prior year based upon 834 File Effective Date

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	Α	В	С	D	Е	F	G	Н	I	J	K	L	М	N	0	Р	Q
1	271 Un:	solici	ted E	ligik	oility	Res	ons	e Con	npanion File Al	ways	Couple	With A TennC	are 834 Trans	action		Tenness	see Specific Values
2	Element ID	Elem Use			DataT ype		Seg Rep	Loop ID	Loop Name	Loop Rep	Comp Seq ID	DED Name	Industry Name or Alias	HIPAA Valid Values	HIPAA Notes	TN Valid Values	TN Notes
225	DTP01	R	3	3	ID	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date/Time Qualifier	Date Time Qualifier	193, 194, 198, 290, 292, 295, 304, 307, 318, 348, 349, 356, 357, 435, 472, 636	Used to convey dates associated with the information contained in the corresponding EB loop. When using codes 307, 435, 472 at this level it is implied that these dates apply only to the EB loop that it is located in. If there is a need to supply a global date it must be provided within the DTP segment is located 3400C.	194	This value is set only if prevEndDate > 0. Value '194' indicates Period End Value being auto plugged by translation map.
226	DTP02	R	2	3	ID	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date Time Period Format Qualifier		D8, RD8	D8=CCYYMMDD RD8=range of dates in format CCYYMMDD-CCYYMMDD	D8	This value is set only if prevEndDate > 0. Value being auto plugged by translation map.
227	DTP03	R	1	35	AN	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT	>1		Date Time Period	Eligibility or Benefit Date Time Period				December 31 of prior year based upon 834 File Effective Date
228	2110C: Rep 13								INFORMATION								Loop 2110C: Rep 13 (Occupational Therapy Limit Current Year)
229	EB01	R	1	2	ID	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Eligibility or Benefit Information		1-8, A-C, CB, D- M, MC, N-Y		F	Value 'F' indicates 'limitations'.
230	EB02	S	3	3	ID	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT	>1						IND	
231	EB03	S	1	2	ID	S	1	2110C	INFORMATION SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1						AD	
	EB04	S	1	3	ID	S	1	2110C	INFORMATION SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Insurance Type Code		12-16, 41-43, 47, AP, C1, CO, CP, D, DB, EP, FF, GP, HM, HM, HS, IN, IP, LC, LD, LI, LT, MA- MC, MH, MI, MP OT, PE, PL, PP, PR, PS, QM, RP, SP, TF, WC, WU		ОТ	
232	EB05	S	1	50	AN	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT	>1		Plan Coverage Description		WO		OCCUPATION AL LIMIT - CURRENT	
233	EB06	S	1	2	ID	S	10	2110C	INFORMATION SUBSCRIBER ELIGIBILITY OR BENEFIT	>1		Time Period Qualifier		6, 7, 13, 21 - 36		YEAR 23	
234	EB09	S	2	2	ID	S	10	2110C	INFORMATION SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Quantity Qualifier			Use to identify the type of units that are being conveyed in EB10.	DY	
236	EB10	S	1	15	R	S	10	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Quantity	Benefit Quantity		Qualified by EB09		0 or greater

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	Α	В	С	D	Е	F	G	Н	1	J	K	L	М	N	0	Р	Q
1	271 Un:	solic	ted I	Eligik	ility	Res	pons	e Con	panion File Al	ways	Couple	With A Tenno	Care 834 Trans	action		Tenness	see Specific Values
2	Element ID	Elem Use	Min Len	Max Len	DataT ype	Seg Use	Seg Rep	Loop ID	Loop Name	Loop Rep	Comp Seq ID	DED Name	Alias	HIPAA Valid Values	HIPAA Notes	TN Valid Values	TN Notes
237	DTP01	R	3	3	ID	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date/Time Qualifier	Date Time Qualifier	193, 194, 198, 290, 292, 295, 304, 307, 318, 348, 349, 356, 357, 435, 472, 636	Used to convey dates associated with the information contained in the corresponding EB loop. When using codes 307, 435, 472 at this level it is implied that these dates apply only to the EB loop that it is located in. If there is a need to supply a global date it must be provided within the DTP segment in local 4100C.	193	This value is set only if currBeginDate > 0. Value '193' indicates Period Start Value being auto plugged by translation map.
000	DTP02	R	2	3	ID	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT	>1		Date Time Period Format Qualifier		D8, RD8	D8=CCYYMMDD RD8=range of dates in format CCYYMMDD-CCYYMMDD	D8	This value is set only if currBeginDate > 0. Value being auto plugged by translation map.
238	DTP03	R	1	35	AN	S	20	21100	INFORMATION SUBSCRIBER	>1		Date Time Period	Eligibility or Benefit				January 1 of current year based upon 834 File
239		K	ľ	33	AIN	3	20	21100	ELIGIBILITY OR BENEFIT			Date Time Period	Date Time Period				Effective Date
240	DTP01	R	3	3	ID	S	20	2110C	INFORMATION SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date/Time Qualifier	Date Time Qualifier	193, 194, 198, 290, 292, 295, 304, 307, 318, 348, 349, 356, 357, 435, 472, 636	Used to convey dates associated with the information contained in the corresponding EB loop. When using codes 307, 435, 472 at this level it is implied that these dates apply only to the EB loop that it is located in. If there is a need to supply a global date it must be provided within the DTP segment in least 3100C.	194	This value is set only if currEndDate > 0. Value '194' indicates Period End Value being auto plugged by translation map.
241	DTP02	R	2	3	ID	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT	>1		Date Time Period Format Qualifier		D8, RD8	DB=CCYYMMDD RD8=range of dates in format CCYYMMDD-CCYYMMDD	D8	This value is set only if currEndDate > 0. Value being auto plugged by translation map.
242	DTP03	R	1	35	AN	S	20	2110C	INFORMATION SUBSCRIBER ELIGIBILITY OR BENEFIT	>1		Date Time Period	Eligibility or Benefit Date Time Period				834 File Effective Date
2 4 2	2110C: Rep 14								INFORMATION								Loop 2110C: Rep 14 (Occupational Therapy Limit Prior Year)
244	EB01	R	1	2	ID	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT	>1		Eligibility or Benefit Information		1-8, A-C, CB, D- M, MC, N-Y		F	Value 'F' indicates 'limitations'.
245	EB02	S	3	3	ID	S	1	2110C	INFORMATION SUBSCRIBER ELIGIBILITY OR BENEFIT	>1						IND	
	EB03	S	1	2	ID	S	1	2110C	INFORMATION SUBSCRIBER ELIGIBILITY OR BENEFIT	>1						AD	
246	EB04	S	1	3	ID	S	1	2110C	INFORMATION SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Insurance Type Code		12-16, 41-43, 47, AP, C1, CO, CP, D, DB, EP, FF, GP, HM, HN HS, IN, IP, LC, LD, LI, LT, MA- MC, MH, MI, MP OT, PE, PL, PP, PR, PS, QM, RP, SP, TF, WC		ОТ	
247248	EB05	S	1	50	AN	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Plan Coverage Description				OCCUPATION AL LIMIT - PRIOR YEAR	

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1	271 Un	solici	ted E	Eligik	oility	Res	pons	e Con	npanion File Al	ways	Couple	e With A TennO	are 834 Trans	action		Tennes	see Specific Values
_		Elem		Max					Loop Name		Comp	DED Name	Industry Name or	HIPAA Valid	HIPAA Notes	TN Valid	TN Notes
2	ID EB06	Use	Len 1	Len 2	ype ID	Use S	Rep 10	ID 2110C	SUBSCRIBER	Rep	Seq ID	Time Period Qualifier	Alias	Values 6, 7, 13, 21 - 36		Values 23	
	LDOO		ľ	_		ľ	10	21100	ELIGIBILITY OR	['		Time r criod Qualifier		0, 7, 13, 21 - 30		20	
249									BENEFIT INFORMATION								
	EB09	S	2	2	ID	S	10	2110C	SUBSCRIBER	>1		Quantity Qualifier			Use to identify the type of units that are	DY	
									ELIGIBILITY OR BENEFIT					DY, HS, LA, LE, MN, P6, QA, S7,	being conveyed in EB10.		
250									INFORMATION					S8, VS, YY.			
250	EB10	S	1	15	R	S	10	2110C	SUBSCRIBER	>1		Quantity	Benefit Quantity		Qualified by EB09		0 or greater
									ELIGIBILITY OR								5 S. G. S.
251									BENEFIT INFORMATION								
	DTP01	R	3	3	ID	S	20	2110C	SUBSCRIBER	>1		Date/Time Qualifier	Date Time Qualifier	193, 194, 198,	Used to convey dates associated with the	193	This value is set only if prevBeginDate > 0.
									ELIGIBILITY OR BENEFIT					290, 292, 295, 304, 307, 318,	information contained in the corresponding EB loop.		Value '193' indicates Period Begin Value being auto plugged by translation map.
									INFORMATION					348, 349, 356,	When using codes 307, 435, 472 at this		value being date plagged by administration map.
														357, 435, 472, 636	level it is implied that these dates apply only to the EB loop that it is located in. If		
														030	there is a need to supply a global date it		
252															must be provided within the DTP segment		
	DTP02	R	2	3	ID	S	20	2110C	SUBSCRIBER ELIGIBILITY OR	>1		Date Time Period		D8, RD8	D8=CCYYMMDD RD8=range of dates in format CCYYMMDD-CCYYMMDD	D8	This value is set only if prevBeginDate > 0.
									BENEFIT			Format Qualifier			format CCYYMMDD-CCYYMMDD		Value being auto plugged by translation map.
253	DTP03	R	1	35	AN	S	20	2110C	INFORMATION SUBSCRIBER	s 1		Date Time Period	Eligibility or Benefit				January 1 of prior year based upon 834 File
	D1P03	K	l'	35	AIN	5	20	21100	ELIGIBILITY OR			Date Time Period	Date Time Period				Effective Date
254									BENEFIT INFORMATION								
	DTP01	R	3	3	ID	S	20	2110C	SUBSCRIBER	>1		Date/Time Qualifier	Date Time Qualifier	193, 194, 198,	Used to convey dates associated with the	194	This value is set only if prevEndDate > 0.
									ELIGIBILITY OR BENEFIT					290, 292, 295, 304, 307, 318,	information contained in the corresponding EB loop.		Value '194' indicates Period End Value being auto plugged by translation map.
									INFORMATION					348, 349, 356,	When using codes 307, 435, 472 at this		value being auto plugged by translation map.
														357, 435, 472, 636	level it is implied that these dates apply only to the EB loop that it is located in. If		
														636	there is a need to supply a global date it		
255															must be provided within the DTP segment		
	DTP02	R	2	3	ID	S	20	2110C	SUBSCRIBER	>1		Date Time Period		D8, RD8	D8=CCYYMMDD RD8=range of dates in	D8	This value is set only if prevEndDate > 0.
									ELIGIBILITY OR BENEFIT			Format Qualifier			format CCYYMMDD-CCYYMMDD		Value being auto plugged by translation map.
256				0.5			20	04400	INFORMATION			D . T. D	E: 7.71				2015
	DTP03	R	1	35	AN	S	20	2110C	SUBSCRIBER ELIGIBILITY OR	>1		Date Time Period	Eligibility or Benefit Date Time Period				December 31 of prior year based upon 834 File Effective Date
257									BENEFIT								
	2110C:	1				1			INFORMATION				 				Loop 2110C: Rep 15
258	Rep 15																(Physical Therapy Limit Current Year)
	EB01	R	1	2	ID	S	1	2110C	SUBSCRIBER	>1		Eligibility or Benefit	1	1-8, A-C, CB, D-		F	Value 'F' indicates 'limitations'.
									ELIGIBILITY OR BENEFIT			Information		M, MC, N-Y			
259		1							INFORMATION								
	EB02	S	3	3	ID	S	1	2110C	SUBSCRIBER ELIGIBILITY OR	>1						IND	
260									BENEFIT								
260	EB03	S	1	2	ID	S	1	2110C	INFORMATION SUBSCRIBER	>1			-			AE	
		ľ	ľ	ſ	ľ	ľ	ľ		ELIGIBILITY OR	Ι΄.							
261									BENEFIT INFORMATION								

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	Α	В	С	D	Е	F	G	Н	I	J	K	L	М	N	0	Р	Q
1	271 Uns	solici			ility	Res	pons	e Con	panion File Al	ways	Couple	With A TennO	are 834 Trans	action		Tenness	see Specific Values
2	Element ID	Elem Use		Max Len	Data1 ype	Seg Use	Seg Rep	Loop ID	Loop Name	Loop Rep	Comp Seq ID	DED Name	Industry Name or Alias	HIPAA Valid Values	HIPAA Notes	TN Valid Values	TN Notes
262	EB04	S	1	3	ID	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Insurance Type Code		12-16, 41-43, 47, AP, C1, CO, CP, D, DB, EP, FF, GP, HM, HN, HS, IN, IP, LC, LD, LI, LT, MA- MC, MH, MI, MP OT, PE, PL, PP, PR, PS, QM, RP, SP, TF, WC, WU	This information qualifies type of policy within insurance program defined in EB03.	ОТ	
-	EB05	S	1	50	AN	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT	>1		Plan Coverage Description				PHYSICAL THERAPY LIMIT -	
263	EB06	S	1	2	ID	S	10	21100	INFORMATION SUBSCRIBER	>1		Time Period Qualifier		6, 7, 13, 21 - 36		CURRENT YEAR 23	
264	LBOO	3		_	ID		10		ELIGIBILITY OR BENEFIT INFORMATION			Time Period Qualifier		0, 7, 13, 21 - 30		23	
265	EB09	S	2	2	ID	S	10		SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Quantity Qualifier			Use to identify the type of units that are being conveyed in EB10.	DY	
266	EB10	S	1	15	R	S	10		SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Quantity	Benefit Quantity		Qualified by EB09		0 or greater
267	DTP01	R	3	3	ID	S	20	2110C	INFORMATION SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date/Time Qualifier	Date Time Qualifier	193, 194, 198, 290, 292, 295, 304, 307, 318, 348, 349, 356, 357, 435, 472, 636	Used to convey dates associated with the information contained in the corresponding EB loop. When using codes 307, 435, 472 at this level it is implied that these dates apply only to the EB loop that it is located in. If there is a need to supply a global date it must be provided within the DTP segment	193	This value is set only if currBeginDate > 0. Value '193' indicates Period Start Value being auto plugged by translation map.
	DTP02	R	2	3	ID	S	20		SUBSCRIBER ELIGIBILITY OR BENEFIT	>1		Date Time Period Format Qualifier		D8, RD8	D8=CCYYMMDD RD8=range of dates in format CCYYMMDD-CCYYMMDD	D8	This value is set only if currBeginDate > 0. Value being auto plugged by translation map.
268269	DTP03	R	1	35	AN	S	20		INFORMATION SUBSCRIBER ELIGIBILITY OR BENEFIT	>1		Date Time Period	Eligibility or Benefit Date Time Period				January 1 of current year based upon 834 File Effective Date
270	DTP01	R	3	3	ID	S	20		INFORMATION SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date/Time Qualifier	Date Time Qualifier	193, 194, 198, 290, 292, 295, 304, 307, 318, 348, 349, 356, 357, 435, 472, 636	Used to convey dates associated with the information contained in the corresponding EB loop. When using codes 307, 435, 472 at this level it is implied that these dates apply only to the EB loop that it is located in. If there is a need to supply a global date it must be provided within the DTP segment	194	This value is set only if currEndDate > 0. Value '194' indicates Period End Value being auto plugged by translation map.
271	DTP02	R	2	3	ID	S	20		SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date Time Period Format Qualifier		D8, RD8	D8=CCYYMMDD RD8=range of dates in format CCYYMMDD-CCYYMMDD	D8	This value is set only if currEndDate > 0. Value being auto plugged by translation map.
272	DTP03	R	1	35	AN	S	20		SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date Time Period	Eligibility or Benefit Date Time Period				834 File Effective Date
	2110C: Rep 16								INCURIVIATION								Loop 2110C: Rep 16 (Physical Therapy Limit Prior Year)

	Α	В	С	D	E	F	G	Н	1	J	K	l L	М	N	0	Р	I Q
1	271 Uns	solici			ility	Res	pons		npanion File Al	ways	Couple	With A TennO	are 834 Trans	action		Tenness	see Specific Values
_					DataT				Loop Name		Comp	DED Name		HIPAA Valid	HIPAA Notes	TN Valid	TN Notes
2	ID ED04	Use	Len	Len	ype ID	Use S	Rep	ID	OUROODINED	Rep	Seq ID	Elisibilitas Desett	Alias	Values		Values	Veloci III in dicata di limitati and
	EB01	ĸ	1	2	טו	5	1	2110C	SUBSCRIBER ELIGIBILITY OR	>1		Eligibility or Benefit Information		1-8, A-C, CB, D- M, MC, N-Y		F	Value 'F' indicates 'limitations'.
274									BENEFIT					, 2,			
2/4	EB02	S	3	3	ID	S	1	21100	INFORMATION SUBSCRIBER	>1						IND	
	LDUZ	Ö	5	3		٥	l'	21100	ELIGIBILITY OR	1						IIND	
275									BENEFIT								
210	EB03	S	1	2	ID	S	1	2110C	INFORMATION SUBSCRIBER	>1						AE	
									ELIGIBILITY OR								
276									BENEFIT INFORMATION								
	EB04	S	1	3	ID	S	1	2110C	SUBSCRIBER	>1		Insurance Type		12-16, 41-43,	This information qualifies type of policy	OT	
									ELIGIBILITY OR BENEFIT			Code		47, AP, C1, CO, CP, D, DB, EP,	within insurance program defined in EB03.		
									INFORMATION					FF, GP, HM, HN,			
														HS, IN, IP, LC,			
														LD, LI, LT, MA- MC. MH. MI. MP.			
														OT, PE, PL, PP,	1		
														PR, PS, QM,			
														RP, SP, TF, WC, WU			
277	ED05	S	1	50	AN	S	4	24400	SUBSCRIBER	>1		Dian Cayaraga		VVO		PHYSICAL	
	EB05	3		50	AN	0		21100	ELIGIBILITY OR	> 1		Plan Coverage Description				THERAPY	
									BENEFIT							LIMIT - PRIOR	
278									INFORMATION							YEAR	
	EB06	S	1	2	ID	S	10	2110C	SUBSCRIBER	>1		Time Period Qualifier		6, 7, 13, 21 - 36		23	
									ELIGIBILITY OR BENEFIT								
279									INFORMATION								
	EB09	S	2	2	ID	S	10	2110C	SUBSCRIBER ELIGIBILITY OR	>1		Quantity Qualifier			Use to identify the type of units that are being conveyed in EB10.	DY	
									BENEFIT					MN, P6, QA, S7,	being conveyed in LB10.		
280									INFORMATION					S8, VS, YY.			
200	EB10	S	1	15	R	S	10	2110C	SUBSCRIBER	>1		Quantity	Benefit Quantity		Qualified by EB09		0 or greater
									ELIGIBILITY OR				,				
281									BENEFIT INFORMATION								
	DTP01	R	3	3	ID	S	20	2110C	SUBSCRIBER	>1		Date/Time Qualifier	Date Time Qualifier	193, 194, 198,	Used to convey dates associated with the	193	This value is set only if prevBeginDate > 0.
						1			ELIGIBILITY OR BENEFIT					290, 292, 295, 304, 307, 318,	information contained in the corresponding EB loop.		Value '193' indicates Period Begin Value being auto plugged by translation map.
						1			INFORMATION					348, 349, 356,	When using codes 307, 435, 472 at this		value being auto plugged by translation map.
						1								357, 435, 472,	level it is implied that these dates apply		
						1								636	only to the EB loop that it is located in. If there is a need to supply a global date it		
282						1									must be provided within the DTP segment		
202	DTP02	R	2	3	ID	S	20	2110C	SUBSCRIBER	>1	1	Date Time Period		D8, RD8	D8=CCYYMMDD RD8=range of dates in	D8	This value is set only if prevBeginDate > 0.
	v_	Γ,	Ĺ	Ĭ	-	Ĭ			ELIGIBILITY OR	l .		Format Qualifier			format CCYYMMDD-CCYYMMDD		Value being auto plugged by translation map.
283									BENEFIT INFORMATION								
	DTP03	R	1	35	AN	S	20	2110C	SUBSCRIBER	>1	l	Date Time Period	Eligibility or Benefit				January 1 of prior year based upon 834 File
						1			ELIGIBILITY OR				Date Time Period				Effective Date
284						1			BENEFIT INFORMATION								

	Α	В	С	D	Е	F	G	Н	I	J	K	L	М	N	0	Р	Q
1	271 Uns	solici	ted E	Eligik	oility	Res	oons	e Con	panion File Al	ways	Couple	With A TennC	are 834 Trans	action	-	Tenness	see Specific Values
2	ID	Elem Use	Min Len	Max Len	DataT ype	Use	Rep	ID .	Loop Name	Loop Rep	Comp Seq ID	DED Name	Industry Name or Alias	HIPAA Valid Values	HIPAA Notes	TN Valid Values	TN Notes
285	DTP01	R	3	3	ID	S	20		SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date/Time Qualifier	Date Time Qualifier	193, 194, 198, 290, 292, 295, 304, 307, 318, 348, 349, 356, 357, 435, 472, 636	Used to convey dates associated with the information contained in the corresponding EB loop. When using codes 307, 435, 472 at this level it is implied that these dates apply only to the EB loop that it is located in. If there is a need to supply a global date it must be provided within the DTP segment in loop 3400C.	194	This value is set only if prevEndDate > 0. Value '194' indicates Period End Value being auto plugged by translation map.
286	DTP02	R	2	3	ID	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date Time Period Format Qualifier		D8, RD8	D8=CCYYMMDD RD8=range of dates in format CCYYMMDD-CCYYMMDD	D8	This value is set only if prevEndDate > 0. Value being auto plugged by translation map.
287	DTP03	R	1	35	AN	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT	>1		Date Time Period	Eligibility or Benefit Date Time Period				December 31 of prior year based upon 834 File Effective Date
288	2110C:								INFORMATION								Loop 2110C: Rep 17
	Rep 17 EB01	R	1	2	ID	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT	>1		Eligibility or Benefit Information		1-8, A-C, CB, D- M, MC, N-Y	-	F	(Psychiatric Limit Current Year) Value 'F' indicates 'limitations'.
289 290	EB02	S	3	3	ID	S	1	2110C	INFORMATION SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1						IND	
291	EB03	S	1	2	ID	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1						A4	
	EB04	S	1	3	ΙD	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Insurance Type Code		12-16, 41-43, 47, AP, C1, C0, CP, D, DB, EP, FF, GP, HM, HN HS, IN, IP, LC, LD, LI, LT, MA- MC, MH, MI, MP OT, PE, PL, PP, PR, PS, QM, RP, SP, TF, WC		ОТ	
292	EB05	S	1	50	AN	S	1	2110C	SUBSCRIBER ELIGIBILITY OR	>1		Plan Coverage Description		WU		PYSCHIATRIC	
293									BENEFIT INFORMATION			Description				CURRENT YEAR	
294	EB06	S	1	2	ID	S	10	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Time Period Qualifier		6, 7, 13, 21 - 36		23	
295	EB09	S	2	2	ID	S	10	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Quantity Qualifier			Use to identify the type of units that are being conveyed in EB10.	VS	
296	EB10	S	1	15	R	S	10		SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Quantity	Benefit Quantity		Qualified by EB09		0 - No current limit exists.

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	Α	В	С	D	Е	F	G	Н	I	J	K	L	М	N	0	Р	Q
1	271 Uns								panion File Al	ways	Couple	With A TennO	are 834 Trans	action		Tenness	see Specific Values
		Elem		Max	DataT			Loop	Loop Name	Loop	Comp	DED Name	Industry Name or	HIPAA Valid	HIPAA Notes	TN Valid	TN Notes
2		Use	Len	Len	уре		Rep	ID	OLIDOODIDED.	Rep	Seq ID	D	Alias	Values		Values	
297		R	3	3	ID	S	20		SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date/Time Qualifier	Date Time Qualifier	193, 194, 198, 290, 292, 295, 304, 307, 318, 348, 349, 356, 357, 435, 472, 636	Used to convey dates associated with the information contained in the corresponding EB loop. When using codes 307, 435, 472 at this level it is implied that these dates apply only to the EB loop that it is located in. If there is a need to supply a global date it must be provided within the DTP segment	193	This value is set only if currBeginDate > 0. Value '193' indicates Period Start Value being auto plugged by translation map.
	DTP02	R	2	3	ID	S	20		SUBSCRIBER ELIGIBILITY OR BENEFIT	>1		Date Time Period Format Qualifier		D8, RD8	D8=CCYYMMDD RD8=range of dates in format CCYYMMDD-CCYYMMDD	D8	This value is set only if currBeginDate > 0. Value being auto plugged by translation map.
298		_							INFORMATION								
299		R	1	35	AN	S	20		SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date Time Period	Eligibility or Benefit Date Time Period				January 1 of current year based upon 834 File Effective Date
300			3	3	ID	S	20		SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date/Time Qualifier	Date Time Qualifier	193, 194, 198, 290, 292, 295, 304, 307, 318, 348, 349, 356, 357, 435, 472, 636	Used to convey dates associated with the information contained in the corresponding EB loop. When using codes 307, 435, 472 at this level it is implied that these dates apply only to the EB loop that it is located in. If there is a need to supply a global date it must be provided within the DTP segment	194	This value is set only if currEndDate > 0. Value '194' indicates Period End Value being auto plugged by translation map.
	DTP02	R	2	3	ID	S	20	2110C	SUBSCRIBER	>1		Date Time Period		D8, RD8	D8=CCYYMMDD RD8=range of dates in	D8	This value is set only if currEndDate > 0.
301									ELIGIBILITY OR BENEFIT INFORMATION			Format Qualifier			format CCYYMMDD-CCYYMMDD		Value being auto plugged by translation map.
302	DTP03	R	1	35	AN	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date Time Period	Eligibility or Benefit Date Time Period				834 File Effective Date
303	2110C: Rep 18																Loop 2110C: Rep 18
		R	1	2	ID	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT	>1		Eligibility or Benefit Information		1-8, A-C, CB, D- M, MC, N-Y		F	(Psychiatric Limit Prior Year) Value 'F' indicates 'limitations'.
304	EB02	S	3	3	ID	S	1	2110C	INFORMATION SUBSCRIBER	>1						IND	
305	LB02	3	3	3	ID				ELIGIBILITY OR BENEFIT INFORMATION							IND	
306	EB03	S	1	2	ID	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1						A4	
307		S	1	3	ID	S	1		SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Insurance Type Code		12-16, 41-43, 47, AP, C1, C0, CP, D, DB, EP, FF, GP, HM, HN HS, IN, IP, LC, LD, LI, LT, MA- MC, MH, MI, MP OT, PE, PL, PP, PR, PS, QM, RP, SP, TF, WC		ОТ	
308		S	1	50	AN	S	1		SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Plan Coverage Description				PYSCHIATRIC LIMIT - PRIOR YEAR	

	Α	В	С	D	Е	F	G	Н	I	J	K	L	М	N	0	Р	Q
1	271 Uns	solici	ted E	Eligik	oility	Res	pons	e Con	npanion File Al	ways	Couple	With A TennO	are 834 Trans	action		Tenness	see Specific Values
2	ID	Use	Min Len	Max Len	уре	Seg Use	Rep	ID .	Loop Name	Loop Rep	Comp Seq ID	DED Name	Industry Name or Alias	Values	HIPAA Notes	TN Valid Values	TN Notes
309	EB06	S	1	2	ID	S	10	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Time Period Qualifier		6, 7, 13, 21 - 36		23	
310	EB09	S	2	2	ID	S	10	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Quantity Qualifier			Use to identify the type of units that are being conveyed in EB10.	VS	
311	EB10	S	1	15	R	S	10	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Quantity	Benefit Quantity		Qualified by EB09		0 - No current limit exists.
312	DTP01	R	3	3	ID	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date/Time Qualifier	Date Time Qualifier	193, 194, 198, 290, 292, 295, 304, 307, 318, 348, 349, 356, 357, 435, 472, 636	Used to convey dates associated with the information contained in the corresponding EB loop. When using codes 307, 435, 472 at this level it is implied that these dates apply only to the EB loop that it is located in. If there is a need to supply a global date it must be provided within the DTP segment	193	This value is set only if prevBeginDate > 0. Value '193' indicates Period Begin Value being auto plugged by translation map.
313	DTP02	R	2	3	ID	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date Time Period Format Qualifier		D8, RD8	D8=CCYYMMDD RD8=range of dates in format CCYYMMDD-CCYYMMDD	D8	This value is set only if prevBeginDate > 0. Value being auto plugged by translation map.
314	DTP03	R	1	35	AN	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date Time Period	Eligibility or Benefit Date Time Period				January 1 of prior year based upon 834 File Effective Date
315	DTP01	R	3	3	ID	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date/Time Qualifier	Date Time Qualifier	193, 194, 198, 290, 292, 295, 304, 307, 318, 348, 349, 356, 357, 435, 472, 636	Used to convey dates associated with the information contained in the corresponding EB loop. When using codes 307, 435, 472 at this level it is implied that these dates apply only to the EB loop that it is located in. If there is a need to supply a global date it must be provided within the DTP segment	194	This value is set only if prevEndDate > 0. Value '194' indicates Period End Value being auto plugged by translation map.
316	DTP02	R	2	3	ID	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT	>1		Date Time Period Format Qualifier		D8, RD8	D8=CCYYMMDD RD8=range of dates in format CCYYMMDD-CCYYMMDD	D8	This value is set only if prevEndDate > 0. Value being auto plugged by translation map.
317	DTP03	R	1	35	AN	S	20	2110C	INFORMATION SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date Time Period	Eligibility or Benefit Date Time Period				December 31 of prior year based upon 834 File Effective Date
318	2110C:								III ZINIMATI ZIN								Loop 2110C: Rep 19
319	Rep 19 EB01	R	1	2	ID	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Eligibility or Benefit Information		1-8, A-C, CB, D- M, MC, N-Y		F	(Inpatient Limit Current Year) Value 'F' indicates 'limitations'.
320	EB02	S	3	3	ID	S	1	2110C	INFORMATION SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1						IND	
321	EB03	S	1	2	ID	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1						48	

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	Α	В	С	D	Е	F	G	Н	l l	J	K	L	М	l N	0	Р	Q
1									panion File Al			With A TennC				Tenness	see Specific Values
-									Loop Name			DED Name		HIPAA Valid	HIPAA Notes	TN Valid	TN Notes
2	EB04	Use S	Len 1	Len 3	ype ID	Use S	Rep 1	ID 2110C	SUBSCRIBER ELIGIBILITY OR	Rep >1	Seq ID	Insurance Type Code	Alias	Values 12-16, 41-43, 47, AP, C1, CO,	This information qualifies type of policy within insurance program defined in EB03.	Values OT	
322									BENEFIT INFORMATION					CP, D, DB, EP, FF, GP, HM, HN HS, IN, IP, LC, LD, LI, LT, MA- MC, MH, MI, MP OT, PE, PL, PP, PR, PS, QM, RP, SP, TF, WC, WU			
	EB05	S	1	50	AN	S	1	2110C	SUBSCRIBER	>1		Plan Coverage				INPATIENT	
323									ELIGIBILITY OR BENEFIT INFORMATION			Description				LIMIT - CURRENT YEAR	
204	EB06	S	1	2	ID	S	10	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT	>1		Time Period Qualifier		6, 7, 13, 21 - 36		23	
324	EB09	S	2	2	ID	S	10	2110C	INFORMATION SUBSCRIBER	>1		Quantity Qualifier		99 CA CE DB	Use to identify the type of units that are	DY	
	LDOO	Ü	_	_		Ü		21100	ELIGIBILITY OR BENEFIT INFORMATION			addinity addinier			being conveyed in EB10.		
325	ED40	S	1	15	R	S	10	24400	SUBSCRIBER	>1		Oventity	Benefit Quantity	00, 70, 11.	Qualified by EB09		0 - No current limit exists.
326	EB10	5	'	15	ĸ	5	10	21100	ELIGIBILITY OR BENEFIT INFORMATION	21		Quantity	Benefit Quantity		Qualified by EB09		U - NO CUITERI IIIIII EXISTS.
327	DTP01	R	3	3	ID	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date/Time Qualifier	Date Time Qualifier	193, 194, 198, 290, 292, 295, 304, 307, 318, 348, 349, 356, 357, 435, 472, 636	Used to convey dates associated with the information contained in the corresponding EB loop. When using codes 307, 435, 472 at this level it is implied that these dates apply only to the EB loop that it is located in. If there is a need to supply a global date it must be provided within the DTP segment	193	This value is set only if currBeginDate > 0. Value '193' indicates Period Start Value being auto plugged by translation map.
328	DTP02	R	2	3	ID	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT	>1		Date Time Period Format Qualifier		D8, RD8	D8=CCYYMMDD RD8=range of dates in format CCYYMMDD-CCYYMMDD	D8	This value is set only if currBeginDate > 0. Value being auto plugged by translation map.
	DTP03	R	1	35	AN	S	20	2110C	INFORMATION SUBSCRIBER ELIGIBILITY OR BENEFIT	>1		Date Time Period	Eligibility or Benefit Date Time Period				January 1 of current year based upon 834 File Effective Date
329	DTP01	R	3	3	ID	S	20	21100	INFORMATION SUBSCRIBER	>1		Date/Time Qualifier	Date Time Qualifier	193, 194, 198,	Used to convey dates associated with the	194	This value is set only if currEndDate > 0.
330		K	3	5					ELIGIBILITY OR BENEFIT INFORMATION	71		Date Time Qualifier	Date Tille Qualife	290, 292, 295, 304, 307, 318, 348, 349, 356, 357, 435, 472, 636	information contained in the corresponding EB loop. When using codes 307, 435, 472 at this level it is implied that these dates apply only to the EB loop that it is located in. If there is a need to supply a global date it must be provided within the DTP segment is 1000.	194	Value '194' indicates Period End Value being auto plugged by translation map.
331	DTP02	R	2	3	ID	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date Time Period Format Qualifier		D8, RD8	D8=CCYYMMDD RD8=range of dates in format CCYYMMDD-CCYYMMDD	D8	This value is set only if currEndDate > 0. Value being auto plugged by translation map.
332	DTP03	R	1	35	AN	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT	>1		Date Time Period	Eligibility or Benefit Date Time Period				834 File Effective Date
	2110C: Rep 20								INFORMATION								Loop 2110C: Rep 20 (Inpatient Limit Prior Year)

	Α	В	С	D	Е	F	G	Н	1 1	J	K	L	М	N	0	Р	Q
1	271 Uns	solici							npanion File Al	ways	Couple	With A Tenno	Care 834 Trans	action		Tenness	see Specific Values
	Element ID				DataT			Loop ID	Loop Name	Loop		DED Name		HIPAA Valid	HIPAA Notes	TN Valid	TN Notes
	EB01	Use R	Len 1	Len 2	ype ID	Use S	Rep 1	2110C	SUBSCRIBER	Rep >1	Seq ID	Eligibility or Benefit	Alias	Values 1-8, A-C, CB, D-		Values F	Value 'F' indicates 'limitations'.
			ľ	_		ľ	ľ	200	ELIGIBILITY OR	•		Information		M, MC, N-Y			Talas i maisates iiimaasiis i
334									BENEFIT INFORMATION								
	EB02	S	3	3	ID	S	1	2110C	SUBSCRIBER	>1						IND	
									ELIGIBILITY OR BENEFIT								
335									INFORMATION								
	EB03	S	1	2	ID	S	1	2110C	SUBSCRIBER ELIGIBILITY OR	>1						48	
220									BENEFIT								
336	EB04	S	1	3	ID	S	1	2110C	INFORMATION SUBSCRIBER	\1		Insurance Type		12-16, 41-43,	This information qualifies type of policy	OT	
	LB04	3	<u>'</u>	3	ID.	3	l'	21100	ELIGIBILITY OR	- 1		Code		47, AP, C1, CO,	within insurance program defined in EB03.	OI	
									BENEFIT					CP, D, DB, EP,			
									INFORMATION					FF, GP, HM, HN, HS, IN, IP, LC,	1		
														LD, LI, LT, MA-			
														MC, MH, MI, MP OT. PE. PL. PP.	,		
														PR, PS, QM,			
														RP, SP, TF, WC,			
337														WU			
	EB05	S	1	50	AN	S	1	2110C	SUBSCRIBER ELIGIBILITY OR	>1		Plan Coverage Description				INPATIENT LIMIT - PRIOR	
338									BENEFIT			2 coonpact				YEAR	
330	EB06	S	1	2	ID	S	10	2110C	INFORMATION SUBSCRIBER	>1		Time Period Qualifier	-	6, 7, 13, 21 - 36		23	
	LDOO	Ĭ		_			10	21100	ELIGIBILITY OR			Time r cried Qualifier		0,7,10,21 00		20	
339									BENEFIT INFORMATION								
	EB09	S	2	2	ID	S	10	2110C	SUBSCRIBER	>1		Quantity Qualifier			Use to identify the type of units that are	DY	
									ELIGIBILITY OR BENEFIT					DY, HS, LA, LE, MN, P6, QA, S7,	being conveyed in EB10.		
									INFORMATION					MIN, P6, QA, S7, S8, VS, YY.			
340	EB10	S	4	15	R	S	10	24400	SUBSCRIBER	>1		Oventity	Benefit Quantity		Qualified by EB09		0 - No current limit exists.
	EBIU	0	'	15	ĸ	3	10	21100	ELIGIBILITY OR	>1		Quantity	Benefit Quantity		Qualified by EB09		0 - NO current limit exists.
341									BENEFIT								
J 4 1	DTP01	R	3	3	ID	S	20	2110C	INFORMATION SUBSCRIBER	>1		Date/Time Qualifier	Date Time Qualifier	193, 194, 198,	Used to convey dates associated with the	193	This value is set only if prevBeginDate > 0.
						Ī			ELIGIBILITY OR]				290, 292, 295,	information contained in the corresponding		Value '193' indicates Period Begin
									BENEFIT INFORMATION					304, 307, 318, 348, 349, 356,	EB loop. When using codes 307, 435, 472 at this		Value being auto plugged by translation map.
									III ORWATION					357, 435, 472,	level it is implied that these dates apply		
														636	only to the EB loop that it is located in. If		
242															there is a need to supply a global date it must be provided within the DTP segment		
342	DTP02	R	2	3	ID	S	20	21100	SUBSCRIBER	>1		Date Time Period		D8, RD8	D8=CCYYMMDD RD8=range of dates in	D8	This value is set only if prevBeginDate > 0.
	DIFUZ	15	_	5	טו	3	20	21100	ELIGIBILITY OR	-		Format Qualifier		טט, אטס	format CCYYMMDD-CCYYMMDD	Do	Value being auto plugged by translation map.
343									BENEFIT								
J-1J	DTP03	R	1	35	AN	S	20	2110C	INFORMATION SUBSCRIBER	>1	-	Date Time Period	Eligibility or Benefit			 	January 1 of prior year based upon 834 File
									ELIGIBILITY OR				Date Time Period				Effective Date
344									BENEFIT INFORMATION								

	Α	В	С	D	Е	F	G	Н		J	K	L	М	N	0	Р	Q
1									panion File Al	ways		With A TennC		action	-	Tenness	see Specific Values
2			Min	Max	DataT ype			Loop ID	Loop Name		Comp Seq ID	DED Name	Industry Name or Alias	HIPAA Valid Values	HIPAA Notes	TN Valid Values	TN Notes
345	DTP01	R	3	3	ID	Ø	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date/Time Qualifier	Date Time Qualifier	193, 194, 198, 290, 292, 295, 304, 307, 318, 348, 349, 356, 357, 435, 472, 636	Used to convey dates associated with the information contained in the corresponding EB loop. When using codes 307, 435, 472 at this level it is implied that these dates apply only to the EB loop that it is located in. If there is a need to supply a global date it must be provided within the DTP segment in least 3100C.	194	This value is set only if prevEndDate > 0. Value '194' indicates Period End Value being auto plugged by translation map.
346	DTP02	R	2	3	ID	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date Time Period Format Qualifier		D8, RD8	D8=CCYYMMDD RD8=range of dates in format CCYYMMDD-CCYYMMDD	D8	This value is set only if prevEndDate > 0. Value being auto plugged by translation map.
347	DTP03	R	1	35	AN	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date Time Period	Eligibility or Benefit Date Time Period				December 31 of prior year based upon 834 File Effective Date
348	2110C: Rep 21								IN CHARACTE								Loop 2110C: Rep 21
349	EB01	R	1	2	ID	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT	>1		Eligibility or Benefit Information		1-8, A-C, CB, D- M, MC, N-Y		F	(Psychiatric Inpatient Current Year) Value 'F' indicates 'limitations'.
	EB02	S	3	3	ID	S	1	2110C	INFORMATION SUBSCRIBER ELIGIBILITY OR BENEFIT	>1						IND	
350	EB03	S	1	2	ID	S	1	2110C	INFORMATION SUBSCRIBER ELIGIBILITY OR BENEFIT	>1						A7	
351	EB04	S	1	3	ID	S	1	2110C	INFORMATION SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Insurance Type Code		12-16, 41-43, 47, AP, C1, CO, CP, D, DB, EP, FF, GP, HM, HN HS, IN, IP, LC, LD, LI, LT, MA- MC, MH, MI, MP OT, PE, PL, PP, PR, PS, QM, RP, SP, TF, WC,	This information qualifies type of policy within insurance program defined in EB03.	от	
352														WU			
353	EB05	S	1	50	AN	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Plan Coverage Description				PSYCHIATRIC INPATIENT LIMIT - CURRENT YEAR	
354	EB06	S	1	2	ID	S	10	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Time Period Qualifier		6, 7, 13, 21 - 36		23	
355	EB09	S	2	2	ID	S	10	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Quantity Qualifier			Use to identify the type of units that are being conveyed in EB10.	DY	
356	EB10	S	1	15	R	S	10	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Quantity	Benefit Quantity		Qualified by EB09		0 - No current limit exists.

	Α	В	С	D	Е	F	G	Н	I	J	K	L	M	N	0	Р	Q
1	271 Uns	solici	ted E	Eligil	oility	Res	pons	e Con	panion File Al	ways	Couple	With A TennO	Care 834 Trans	action		Tenness	see Specific Values
2	Element ID	Elem Use	Min Len	Max Len	Data1	Seg Use	Seg Rep	Loop ID	Loop Name		Comp Seq ID	DED Name	Industry Name or Alias	HIPAA Valid Values	HIPAA Notes	TN Valid Values	TN Notes
357	DTP01	R	3	3	ID	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date/Time Qualifier	Date Time Qualifier	193, 194, 198, 290, 292, 295, 304, 307, 318, 348, 349, 356, 357, 435, 472, 636	Used to convey dates associated with the information contained in the corresponding EB loop. When using codes 307, 435, 472 at this level it is implied that these dates apply only to the EB loop that it is located in. If there is a need to supply a global date it must be provided within the DTP segment	193	This value is set only if currBeginDate > 0. Value '193' indicates Period Start Value being auto plugged by translation map.
358	DTP02	R	2	3	ID	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date Time Period Format Qualifier		D8, RD8	DB=CCYYMMDD RD8=range of dates in format CCYYMMDD-CCYYMMDD	D8	This value is set only if currBeginDate > 0. Value being auto plugged by translation map.
359	DTP03	R	1	35	AN	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT	>1		Date Time Period	Eligibility or Benefit Date Time Period				January 1 of current year based upon 834 File Effective Date
360	DTP01	R	3	3	ID	S	20	2110C	INFORMATION SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date/Time Qualifier	Date Time Qualifier	193, 194, 198, 290, 292, 295, 304, 307, 318, 348, 349, 356, 357, 435, 472, 636	Used to convey dates associated with the information contained in the corresponding EB loop. When using codes 307, 435, 472 at this level it is implied that these dates apply only to the EB loop that it is located in. If there is a need to supply a global date it must be provided within the DTP segment	194	This value is set only if currEndDate > 0. Value '194' indicates Period End Value being auto plugged by translation map.
361	DTP02	R	2	3	ID	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date Time Period Format Qualifier		D8, RD8	D8=CCYYMMDD RD8=range of dates in format CCYYMMDD-CCYYMMDD	D8	This value is set only if currEndDate > 0. Value being auto plugged by translation map.
362	DTP03	R	1	35	AN	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date Time Period	Eligibility or Benefit Date Time Period				834 File Effective Date
363	2110C: Rep 22																Loop 2110C: Rep 22 (Psychiatric Inpatient Prior Year)
364	EB01	R	1	2	ID	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Eligibility or Benefit Information		1-8, A-C, CB, D- M, MC, N-Y		F	Value 'F' indicates 'limitations'.
365	EB02	S	3	3	ID	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1						IND	
366	EB03	S	1	2	ID	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1						A7	
367	EB04	S	1	3	ID	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Insurance Type Code		12-16, 41-43, 47, AP, C1, C0, CP, D, DB, EP, FF, GP, HM, HN HS, IN, IP, LC, LD, LI, LT, MA- MC, MH, MI, MP OT, PE, PL, PP, PR, PS, QM, RP, SP, TF, WC		от	
368		S	1	50	AN	S	1		SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Plan Coverage Description				PSYCHIATRIC INPATIENT LIMIT - PRIOR YEAR	

	Α	В	С	D	Е	F	G	Н	I	J	K	L	М	N	0	Р	Q
1	271 Uns	solici	ted E	ligib	ility	Res	pons	e Con	panion File Al	ways	Couple	With A TennO	are 834 Trans	action		Tenness	see Specific Values
2	ID	Elem Use	Min Len		ype	Seg Use	Rep	ID .	Loop Name	Loop Rep	Comp Seq ID	DED Name	Industry Name or Alias	Values	HIPAA Notes	TN Valid Values	TN Notes
369	EB06	S	1	2	ID	S	10	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Time Period Qualifier		6, 7, 13, 21 - 36		23	
370	EB09	S	2	2	ID	S	10	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Quantity Qualifier			Use to identify the type of units that are being conveyed in EB10.	DY	
371	EB10	S	1	15	R	S	10	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Quantity	Benefit Quantity		Qualified by EB09		0 - No current limit exists.
372	DTP01	R	3	3	ΙD	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date/Time Qualifier	Date Time Qualifier	193, 194, 198, 290, 292, 295, 304, 307, 318, 348, 349, 356, 357, 435, 472, 636	Used to convey dates associated with the information contained in the corresponding EB loop. When using codes 307, 435, 472 at this level it is implied that these dates apply only to the EB loop that it is located in. If there is a need to supply a global date it must be provided within the DTP segment	193	This value is set only if prevBeginDate > 0. Value '193' indicates Period Begin Value being auto plugged by translation map.
373	DTP02	R	2	3	ID	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date Time Period Format Qualifier		D8, RD8	D8=CCYYMMDD RD8=range of dates in format CCYYMMDD-CCYYMMDD	D8	This value is set only if prevBeginDate > 0. Value being auto plugged by translation map.
374	DTP03	R	1	35	AN	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date Time Period	Eligibility or Benefit Date Time Period				January 1 of prior year based upon 834 File Effective Date
	DTP01	R	3	3	ΙD	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date/Time Qualifier	Date Time Qualifier	193, 194, 198, 290, 292, 295, 304, 307, 318, 348, 349, 356, 357, 435, 472, 636	Used to convey dates associated with the information contained in the corresponding EB loop. When using codes 307, 435, 472 at this level it is implied that these dates apply only to the EB loop that it is located in. If there is a need to supply a global date it must be provided within the DTP segment	194	This value is set only if prevEndDate > 0. Value '194' indicates Period End Value being auto plugged by translation map.
375	DTP02	_	0	0	ID	S	20	04400	SUBSCRIBER	>1		Date Time Period		D8, RD8	D8=CCYYMMDD RD8=range of dates in	D8	This color is not solvifus out of Date 2.0
376		R	2	3	טו	3	20	21100	ELIGIBILITY OR BENEFIT INFORMATION	~1		Format Qualifier		D6, KD6	format CCYYMMDD-CCYYMMDD	D8	This value is set only if prevEndDate > 0. Value being auto plugged by translation map.
377	DTP03	R	1	35	AN	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT	>1		Date Time Period	Eligibility or Benefit Date Time Period				December 31 of prior year based upon 834 File Effective Date
	2110C:								INFORMATION				<u> </u>				Loop 2110C: Rep 23
378	Rep 23 EB01	R	1	2	ID	S	1	2110C	SUBSCRIBER	>1		Eligibility or Benefit	 	1-8, A-C, CB, D-		СВ	(Family Size)
379									ELIGIBILITY OR BENEFIT INFORMATION			Information		M, MC, N-Y			
380	EB02	S	3	3	ID	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1						FAM	
381	EB03	S	1	2	ID	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1						60	

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	Α	В	С	D	Е	F	G	Н	ı	J	K	L	М	N	0	Р	Q
1	271 Uns								panion File Alv			With A TennC		action		Tenness	see Specific Values
•		Elem										DED Name	Industry Name or		HIPAA Notes	TN Valid	TN Notes
2			Len	Len	уре	Use		ID		Rep	Seq ID		Alias	Values		Values	
382	EB04	S	1	3	ID	S	1		SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Insurance Type Code		12-16, 41-43, 47, AP, C1, CO, CP, D, DB, EP, FF, GP, HM, HN, HS, IN, IP, LC, LD, LI, LT, MA- MC, MH, MI, MP OT, PE, PL, PP, PR, PS, GM, RP, SP, TF, WC, WU		ОТ	
	EB05	S	1	50	AN	S	1	2110C	SUBSCRIBER	>1		Plan Coverage				Family Size	
000									ELIGIBILITY OR BENEFIT			Description					
383 384		S	2	2	ID	S	10	2110C	INFORMATION SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Quantity Qualifier			Use to identify the type of units that are being conveyed in EB10.	CA	Value 'CA' indicates 'Covered - Actual'. Value being auto plugged by translation map.
00 1	EB10	S	1	15	R	S	10	2110C	SUBSCRIBER	>1		Quantity	Benefit Quantity		Qualified by EB09		1 or greater
385									ELIGIBILITY OR BENEFIT INFORMATION								
386	2100C: Rep 24																Loop 2110C: Rep 24 (Medicare Buy-in Premium)
		R	1	2	ID	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Eligibility or Benefit Information		1-8, A-C, CB, D- M, MC, N-Y		D	Imegicare Buv-in Premium
	EB02	S	3	3	ID	S	1	2110C	SUBSCRIBER ELIGIBILITY OR	>1						IND	
388									BENEFIT INFORMATION								
389	EB03	S	1	2	ID	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1						60	
	EB04	S	1	3	ID	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Insurance Type Code		12-16, 41-43, 47, AP, C1, CO, CP, D, DB, EP, FF, GP, HM, HN, HS, IN, IP, LC, LD, LI, LT, MA- MC, MH, MI, MP OT, PE, PL, PP, PR, PS, QM, RP, SP, TF, WC,		ОТ	OT is used since there can be a buy-in amount for both parts A and B. The amount represented in this loop is all buy-in amounts added together.
390														wu			
391	EB05	S	1	50	AN	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT	>1		Plan Coverage Description				Medicare Buy- In	
	EB07	S	1	18	ID	S	10	2110C	INFORMATION SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1			Benefit Amount				0.00 or greater
393		R	2	3	ID	S	9	2110C	INFORMATION SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Reference Identification Qualifier			Use 1L, 1W, 18, 49, 6P, A6, F6, IG, N6 AND NQ only in an EB loop with EB01=R.	9F	

	Α				Е				I	J	K	L	М	N	0	Р	Q
1	271 Un	solici	ted l	Eligit	oility	Res	oons	e Com	panion File Al	ways	Couple	With A TennC	are 834 Trans	action		Tenness	see Specific Values
2	Element ID	Elem Use	Min Len	Max Len	DataT ype	Seg Use	Seg Rep	Loop ID	Loop Name	Loop Rep	Comp Seq ID	DED Name	Industry Name or Alias	HIPAA Valid Values	HIPAA Notes	TN Valid Values	TN Notes
394	REF02	R	1	30	AN	S	9		SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Reference Identification	Subscriber Eligibility or Benefit Identifier	,			Premium Payer Code
395	REF03	S	1	80	AN	S	9		SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Description	Plan Sponsor Name				"Premium Payer Code"
396	DTP01	R	3	3	ID	S	20		SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date/Time Qualifier	Date Time Qualifier	193, 194, 198, 290, 292, 295, 304, 307, 318, 348, 349, 356, 357, 435, 472, 636	Used to convey dates associated with the information contained in the corresponding EB loop. When using codes 307, 435, 472 at this level it is implied that these dates apply only to the EB loop that it is located in. If there is a need to supply a global date it must be provided within the DTP segment	348	This value is set only if buyInEffectiveDate > 0. Value '348' indicates Benefit Begin Value being auto plugged by translation map.
	DTP02	R	2	3	ID	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT	>1		Date Time Period Format Qualifier		D8, RD8	D8=CCYYMMDD RD8=range of dates in format CCYYMMDD-CCYYMMDD	D8	This value is set only if buyInEffectiveDate > 0. Value being auto plugged by translation map.
397 398	DTP03	R	1	35	AN	S	20		INFORMATION SUBSCRIBER ELIGIBILITY OR BENEFIT	>1		Date Time Period	Eligibility or Benefit Date Time Period				Buy-in Premium Effective Date
	244001								INFORMATION								Loop 2110C: Rep 25
399	Rep 25 EB01	R	1	2	ID	S	1		SUBSCRIBER ELIGIBILITY OR BENEFIT	>1		Eligibility or Benefit Information		1-8, A-C, CB, D- M, MC, N-Y		Y	(Spend Down Amount)
400									INFORMATION								
401	EB02	S	3	3	ID	S	1		SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1						IND	
402	EB03	S	1	2	ID	S	1		SUBSCRIBER ELIGIBILITY OR BENEFIT	>1						30	
	EB04	S	1	3	ID	S	1		INFORMATION SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Insurance Type Code		12-16, 41-43, 47, AP, C1, CO, CP, D, DB, EP, FF, GP, HM, HN HS, IN, IP, LC, LD, LI, LT, MA- MC, MH, MI, MP OT, PE, PL, PP, PR, PS, QM, RP, SP, TF, WC,		ОТ	
403														WU			
404	EB05	S	1	50	AN	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Plan Coverage Description				Spend Down Amount	
405	EB06	S	1	2	ID	S	10		SUBSCRIBER ELIGIBILITY OR BENEFIT	>1		Time Period Qualifier		6, 7, 13, 21 - 36		36	
	EB07	S	1	18	ID	S	10		INFORMATION SUBSCRIBER ELIGIBILITY OR BENEFIT	>1			Benefit Amount				0.00 or greater
406						1			INFORMATION								

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	Α	В	С	D	Ε	F	G	Н	I	J	K	L	М	N	0	Р	Q
1	271 Uns	solici	ted E	ligik	oility	Res	oons	e Com	panion File Al	ways	Couple	With A TennC	are 834 Trans	action		Tenness	see Specific Values
2			Min Len	Max Len	DataT ype		Seg Rep	Loop ID	Loop Name	Loop Rep	Comp Seq ID	DED Name	Industry Name or Alias	HIPAA Valid Values	HIPAA Notes	TN Valid Values	TN Notes
407	DTP01	R	3	3	ID	S	20		SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date/Time Qualifier	Date Time Qualifier	193, 194, 198, 290, 292, 295, 304, 307, 318, 348, 349, 356, 357, 435, 472, 636	Used to convey dates associated with the information contained in the corresponding EB loop. When using codes 307, 435, 472 at this level it is implied that these dates apply only to the EB loop that it is located in. If there is a need to supply a global date it must be provided within the DTP segment in long 3400C	198	This value is set only if spenddownBeginDate > 0. Value '198' indicates completion.
408		R	2	3	ID	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT	>1		Date Time Period Format Qualifier		D8, RD8	D8=CCYYMMDD RD8=range of dates in format CCYYMMDD-CCYYMMDD	D8	This value is set only if eligBeginDate > 0. Value being auto plugged by translation map.
409	DTP03	R	1	35	AN	S	20	2110C	INFORMATION SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date Time Period	Eligibility or Benefit Date Time Period				Spend down completion date
410	2110C:								IN ONWATION								Loop 2110C: Rep 26 (Lock-in)
411	TOD EO	R	1	2	ID	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Eligibility or Benefit Information		1-8, A-C, CB, D- M, MC, N-Y		N	This value is set only if lockinServiceTypeCode is not blank. Value 'N' indicates 'services limited to following provider'
412		S	3	3	ID	S	1		SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Coverage Level Code	Benefit Coverage Level Code	CHD, DEP, ECH, EMP, ESP FAM, IND, SPC, SPO	Identifies who in family is covered. Use if available.	IND	This value is set only if lockinServiceTypeCode is not blank. Value 'IND' indicates 'individual'.
413		S	1	2	ID	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Service Type Code		1-28, 30, 32-99, A0-A9, AA-AO, AQ-AR, BA-BN, BP-BS			
414		S	1	50	AN	S	1	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Plan Coverage Description				Lockin	This value set if lockinServiceTypeCode is not blank. Value being auto plugged by translation map.
415		R	3	3	ID	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date/Time Qualifier	Date Time Qualifier	193, 194, 198, 290, 292, 295, 304, 307, 318, 348, 349, 356, 357, 435, 472, 636	Used to convey dates associated with the information contained in the corresponding EB loop. When using codes 307, 435, 472 at this level it is implied that these dates apply only to the EB loop that it is located in. If there is a need to supply a global date it must be provided within the DTP segment	307	This value is set only if lockinBeginDate > 0. Value '307' indicates 'eligibility'. Value being auto plugged by translation map.
416		R	2	3	ID	S	20	2110C	SUBSCRIBER ELIGIBILITY OR BENEFIT	>1		Date Time Period Format Qualifier		D8, RD8	D8=CCYYMMDD RD8=range of dates in format CCYYMMDD-CCYYMMDD	D8, RD8	This value is set only if lockinBeginDate > 0. D8 is used if no end date is provided.
417		R	1	35	AN	S	20	2110C	INFORMATION SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	>1		Date Time Period	Eligibility or Benefit Date Time Period				This value is set only if lockinBeginDate > 0.
418		R	1	6	AN	S	1		IINFORMATION			Loop Identifier Code		2120	Identifies the beginning of the Benefit Related Entity Name loop. Because the subscriber name loop and this loop both begin with NM1 segments, the LS and LE segments are used to differentiate these	2120	This value set if lockinProviderLastName string length > 1. Value being auto plugged by translation map.
419	NM101	R	2	3	ID	S	1	2120C	SUBSCRIBER BENEFIT RELATED ENTITY NAME	1		Entity Identifier Code		13, 1P, 2B, 36, 73, FA, GP, IL, LR, P3, P4, P5, PR, PRP, SEP, TTP VN X3	THE RESIDENCE OF THE STREET	13	This value is set only if lockinProviderNameType is not blank. Value being auto plugged by translation map.

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	Α	В	С	D	Ε	F	G	Н	I	J	K	L	М	N	0	Р	Q
1	271 Un:	solici		_	-			e Con	npanion File Alv	ways	Couple	With A TennC	are 834 Trans	action		Tennes	see Specific Values
2	Element ID	Elem Use		Max Len	DataT ype	Seg Use	Seg Rep	Loop ID	Loop Name	Loop Rep	Comp Seq ID	DED Name	Industry Name or Alias	HIPAA Valid Values	HIPAA Notes	TN Valid Values	TN Notes
420	NM102	R	1	1	ID	S	1	2120C	SUBSCRIBER BENEFIT RELATED ENTITY NAME	1		Entity Type Qualifier		1, 2	1=person 2=non-person entity	1, 2	
421	NM103	S	1	35	AN	S	1	2120C	SUBSCRIBER BENEFIT RELATED ENTITY NAME	1		Name Last or Organization Name	Benefit Related Entity Last or Organization Name				
422	NM104	S	1	25	AN	S	1	2120C	SUBSCRIBER BENEFIT RELATED ENTITY NAME	1		Name First	Benefit Related Entity First Name		Use only if available and NM102=1		will be blank if lockin provider is not a person entity (ie NM102 = '2')
423	NM105	S	1	25	AN	S	1	2120C	SUBSCRIBER BENEFIT RELATED ENTITY NAME	1		Name Middle	Benefit Related Entity Middle Name		Use only if available and NM102=1		will be blank if lockin provider is not a person entity (ie NM102 = '2')
424	NM108	S	1	2	ID	S	1	2120C	SUBSCRIBER BENEFIT RELATED ENTITY NAME	1		Identification Code Qualifier		24, 34, 46, FA, FI, MI, NI, PI, PP, SV, XV, XX,		34, FI	34 for SSN or FI for tax ID
425	NM109	S	2	80	AN	S	1	2120C	SUBSCRIBER BENEFIT RELATED ENTITY NAME	1		Identification Code	Benefit Related Entity Identifier				
426	PER01	R	2	2	ID	S	3	2120C	SUBSCRIBER BENEFIT RELATED ENTITY NAME	1		Contact Function Code		IC	If segment is used, at a minimum either PER02 must be used or PER03 and PER04 must be used. It is recommend that at least PER02, PER03 and PER04 are sent if this segment is used.	IC	This value is set only if lockinProviderPhone is not blank. Value being auto plugged by translation map.
427	PER03	S	2	2	ID	S	3	2120C	SUBSCRIBER BENEFIT RELATED ENTITY NAME	1		Communication Number Qualifier		ED, EM, FX, TE, WP	ED=EDI Access Number; EM=email; FX=fax; TE=telephone; WP=work phone	TE	This value is set only if lockinProviderPhone is not blank. Value being auto plugged by translation map.
428	PER04	S	1	80	AN	S	3	2120C	SUBSCRIBER BENEFIT RELATED ENTITY NAME	1		Communication Number	Benefit Related Entity Communication Number		Format AAABBBCCCC. If extension sent, should be immediately following telephone number.		Format AAABBBCCCC
429	LE01	R	1	6	AN	S	1					Loop Identifier Code		2120	Contains same value as in LS01 of the LS segment		Translation map sets value to same as LS01.
430	SE02	R	4	9	AN	R	1		TRANSACTION SET TRAILER	1		Transaction Set Control Number			Must be identical to the one in SE02		
431	GE01	R	1	6	N0	R			FUNCTIONAL GROUP TRAILER			Number of Transaction Sets Included					
432	GE02	R	1	9	N0	R			FUNCTIONAL GROUP TRAILER			Group Control Number		= GS06		= GS06	
433	IEA01	R	1	5	N0	R			INTERCHANGE CONTROL TRAILER			Number of Included Functional Groups					
434	IEA02	R	9	9	N0	R			INTERCHANGE CONTROL TRAILER			Interchange Control Number		= ISA13		= ISA13	

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